12/18/2009 13:32

Image# 29993483598

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American College of Radiology Association Political Action Committee 1891 Preston White Drive ADDRESS (number and street) Check if different than previously Reston ٧A 20191 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00343459 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 0 1 2009 30 2009 1 1 11 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. DR William Herrington Type or Print Name of Treasurer Electronically Filed by DR William Herrington 12 18 2009 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

2 / 85 FEC Form 3X (Rev. 02/2003)

	Write or Type Committee Name American College of Radiology Association Political Action Committee					
ſ	Report Covering the Period: From:	M M O 1 Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1	To: 0 0 0 0 2 0 0 9			
		COLUMN A This Period	COLUMN B Calendar Year-to-Date			
6.	(a) Cash on Hand January 1 2009		336659.40			
	(b) Cash on Hand at Begining of Reporting Period	553170.57				
	(c) Total Receipts (from Line 19)	48544.39	1032596.60			
	(d) Subtotal (add lines 6(b) and					
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	601714.96	1369256.00			
7.	Total Disbursements (from Line 31)	102964.53	870505.57			
8.	Cash on Hand at Close of Reporting Period					
	(subtract Line 7 from Line 6(d))	498750.43	498750.43			
9.	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00				
10.	Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D)	0.00				

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 85

Write or Type Committee Name

American College of Radiology Association Political Action Committee

м м 1 1 0 1 м°м 1 1 3 0 2009 2009 Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 43586.64 901979.80 (i) Itemized (use Schedule A) 4943.00 126354.10 (ii) Unitemized (iii) TOTAL (add 48529.64 1028333.90 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 48529.64 1028333.90 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 3500.00 Political Committees 17. Other Federal Receipts 14.75 762.70 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 48544.39 1032596.60 12, 13, 14, 15, 16, 17, and 18(c))

48544.39

1032596.60

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 85

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		l .
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	1950.00
	Expenditures(c) Total Operating Expenditures	0.00	1930.00
	(add 21(a)(i), (a)(ii) and (b))	0.00	1950.00
22.	Transfers to Affiliated/Other Party	0.00	0.00
23.	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	102500.00	856500.00
24.	Independent Expenditure	0.00	0.00
5.	(use Schedule E)	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
7	Loans Made	0.00	0.00
	Refunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	3536.66
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	3536.66
	(add Lines 20(a), (b), and (c))		
29.	Other Disbursements	464.53	8518.91
30.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(1) 1 6061 61 511 616		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))		
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	102964.53	870505.57
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	102964.53	870505.57

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 85

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) from Line 11(d), page 3)	48529.64	1028333.90
4. Total Contribution Refunds (from Line 28(d))	0.00	3536.66
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	48529.64	1024797.24
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	1950.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	1950.00

FE6AN026

Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Asso Full Name (Last, First, Middle Initial) Dr. Adam Guttentag Mailing Address Albert Einstein Medic 5501 Old York Rd City	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee. Date of Receipt		
Full Name (Last, First, Middle Initial) Dr. Adam Guttentag Mailing Address Albert Einstein Medic 5501 Old York Rd	al Center State		<u> </u>		
5501 Old York Rd	State	7in Codo	M M / D D / V V V		
Citv		Zin Codo	11 03 2009		
		·	Transaction ID: 32125917		
Philadelphia FEC ID number of contributing federal political committee.	C	19141-3098	Amount of Each Receipt this Period 250.00		
Name of Employer Albert Einstein HealthCare Network Receipt For: Primary General Other (specify) ▼		tic Radiologist e Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Dr. Frank Hayden, JR Mailing Address 101 Babbs Hollow			Date of Receipt		
City	State	Zip Code	Transaction ID: 32125920		
Greenville	SC	29607-3745	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		500.00		
Name of Employer Comanche County Memorial Hospital	Occupation Diagnos	n tic Radiologist			
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00			
Full Name (Last, First, Middle Initial) Dr. David Miller			Date of Receipt		
City	State	Zip Code	1 1 0 3 2 0 0 9 Transaction ID: 32125921		
Voorhees	NJ	08043-2100	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		500.00		
Name of Employer South Jersey Radiology As- sociates	Occupation Diagnost	n tic Radiologist			
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00			
SUBTOTAL of Receipts This Page (optional)			1250.00		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Dr. Jeffrey T. Hall Mailing Address St Alphonsus Regiona 1055 N Curtis Rd	I Med Cente	r	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 32125922
	Boise FEC ID number of contributing federal political committee.	C	83706-1352	Amount of Each Receipt this Period 1000.00
	Name of Employer Gem State Radiology Receipt For: Primary General Other (specify) ▼	, '	ntic Radiologist e Year-to-Date ▼ 1333.34]
- В.	Full Name (Last, First, Middle Initial) Dr. Christopher Day Mailing Address 13012 Covered Bridge	Rd		Date of Receipt 1 1 0 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 32234016
	<u>Sellersburg</u>	IN	47172-8604	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Radiology Associates, Inc.	, ' ' -	tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
- C.	Full Name (Last, First, Middle Initial) Dr. Michael Tuite Mailing Address 7699 Leta Way			Date of Receipt 1 1 0 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 32234017
	Verona FEC ID number of contributing federal political committee.	C	53593-8631	Amount of Each Receipt this Period 500.00
	Name of Employer University of Wisconsin Hospital Receipt For:		n tic Radiologist e Year-to-Date ▼	
	Primary General Other (specify) ▼	Aggregate	500.00	
	SUBTOTAL of Receipts This Page (optional)			2500.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 85 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Robert Schaaf			Date of Receipt
Mailing Address Wake Radiology 3949 Browning Pl			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State NC	Zip Code	Transaction ID: 32234018
Raleigh FEC ID number of contributing federal political committee.	C	27609-6504	Amount of Each Receipt this Period 500.00
Name of Employer Wake Radiology	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Jeffrey Sue			Date of Receipt
Mailing Address 1481 S King St Ste 2	11 05 7 9 9		
City Honolulu	State HI	Zip Code 96814-2692	Transaction ID: 32234119
FEC ID number of contributing federal political committee.	C	90014-2092	Amount of Each Receipt this Period
Name of Employer Yeoh & Muranaka, MD, Inc.	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Neal Abdullah			Date of Receipt
Mailing Address 3115 Forrester S			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State IN	Zip Code	Transaction ID: 32234123
Bloomington FEC ID number of contributing federal political committee.	C	47401-2404	Amount of Each Receipt this Period 250.00
Name of Employer Southern Indiana Radiolog- ical Associat		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			1750.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associated the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Dr. Steven Westgate Mailing Address Ellis Fischel Cancer C	Center		Date of Receipt
	115 Business Loop 70		7'- 0-4-	11 05 2009
	City Columbia	State MO	Zip Code 65203-3299	Transaction ID: 32234127 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00200 0200	500.00
	Name of Employer Self-Employed	Occupation Radiation	n n Oncologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
- З.	Full Name (Last, First, Middle Initial) Dr. Ole Sami Aassar Mailing Address 1031 Ardsley Rd	.I.		Date of Receipt
				11 2009
	City	State	Zip Code	Transaction ID: 32282894
	Charlotte	NC	28207-1815	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		185.00
	Name of Employer Charlotte Radiology	, ' <u> </u>	tic Radiologist	
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 248.00	
-).	Full Name (Last, First, Middle Initial) Dr. Eric Alpert			Date of Receipt
	Mailing Address 3219 Seven Eagles R	d		1 1 1 1 2 0 0 9
	City	State	Zip Code	Transaction ID: 32282895
	Charlotte	NC	28210-5938	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		126.00
	Name of Employer Charlotte Radiology	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 252.00	
	SUBTOTAL of Receipts This Page (optional) .	1		811.00
	TOTAL This Period (last page this line number	r only)		

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
4	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma le name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Associ	ciation Politic	al Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Ross Bellavia Mailing Address 8618 Longview Club	Date of Receipt		
				11 11 2009
	City <u>Waxhaw</u>	State NC	Zip Code 28173-6821	Transaction ID: 32282896 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20170 0021	374.00
	Name of Employer Charlotte Radiology	Occupation	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Dr. Christina Chaconas Mailing Address 3908 Foxcroft Rd			Date of Receipt
				111 2009
	City Charlotte	State NC	Zip Code 28211-3757	Transaction ID: 32282897
	FEC ID number of contributing federal political committee.	C	20211-0707	Amount of Each Receipt this Period 374.00
	Name of Employer Charlotte Radiology	Occupation Diagnost	on tic Radiologist	
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 500.00]
_ C.	Full Name (Last, First, Middle Initial) Dr. C Chang			Date of Receipt
	Mailing Address 7113 Fairway Vista D	r		1 1 1 2 0 0 9
	City Charlotte	State NC	Zip Code 28226-6870	Transaction ID: 32282898
	FEC ID number of contributing federal political committee.	C	20220-0070	Amount of Each Receipt this Period 374.00
	Name of Employer Charlotte Radiology, P.A.	Occupation	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	_ ' 	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)	1		1122.00
	TOTAL This Period (last page this line numbe		<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Associ	ation Politic	al Action Committee	
∠ A .	Full Name (Last, First, Middle Initial) Dr. Jonathan Clemente			Date of Receipt
	Mailing Address 1620 Biltmore Drive			111 11 2009
	City <u>Charlotte</u>	State NC	Zip Code	Transaction ID: 32282899
	FEC ID number of contributing federal political committee.	C	28207-2612	Amount of Each Receipt this Period 374.00
	Name of Employer NYU/Bellevue/VA Medical Center Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	,	tic Radiologist e Year-to-Date ▼ 500.00]
– В.	Full Name (Last, First, Middle Initial) Dr. Gary De Filipp Mailing Address Charlotte Radiology Pr	Α		Date of Receipt
	PO Box 36937	State	Zip Code	11 11 2009
	Charlotte	NC	28236-6937	Transaction ID: 32282900 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		374.00
	Name of Employer Charlotte Radiology PA	Occupation Diagnos	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
- С.	Full Name (Last, First, Middle Initial) Dr. Matthew Gromet			Date of Receipt
	Mailing Address Charlotte Radiology Po 3030 Latrobe Dr	4		M M / D D / Y Y Y Y Y Y Y Y 1 1 1 1 2 0 0 9
	City	State	Zip Code	Transaction ID: 32282901
	Charlotte FEC ID number of contributing federal political committee.	NC C	28211-4866	Amount of Each Receipt this Period 374.00
	Name of Employer Charlotte Radiology	Occupation	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	. '	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			1122.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC FITEMIZED RECEIPTS	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such or for commercial purposes, othe NAME OF COMMITTEE (In FAMERICAN College of Rad	r than using the name and a Full)	ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Dr. Olin Harbury Mailing Address Charlotte 3030 Latr	Radiology	Zip Code	Date of Receipt M
Charlotte FEC ID number of contributing federal political committee.	NC C	28211-4867	Amount of Each Receipt this Period 374.00
Name of Employer Mercy Hospital Receipt For: Primary Gener Other (specify) ▼	Aggrega	te Year-to-Date ▼	
Full Name (Last, First, Middle Dr. Scott Hees Mailing Address 119 Saint	·		Date of Receipt 1 1 1 1 2 0 0 9
City Pinehurst FEC ID number of contributing federal political committee.	State NC	Zip Code 28374-8104	Transaction ID: 32282903 Amount of Each Receipt this Period 374.00
Name of Employer Charlotte Radiology Receipt For: Primary Gener	Aggrega	ton stic Radiologist te Year-to-Date ▼	
Full Name (Last, First, Middle Dr. Kimberly Hendrix Mailing Address 352 Syca	Initial) more Ridge Rd NE	300.00	Date of Receipt 1 1 1 1 2 0 0 9
City Concord FEC ID number of contributing federal political committee.	State NC	Zip Code 28025-7806	Transaction ID: 32282904 Amount of Each Receipt this Period 266.00
Name of Employer Self-Employed Receipt For: Primary Gener Other (specify)	Aggrega	tion stic Radiologist te Year-to-Date ▼ 356.00	
SUBTOTAL of Receipts This Pa	age (optional)		1014.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 85 (check only one) X 11a
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ . .	Full Name (Last, First, Middle Initial) Dr. Brian Howard Mailing Address 6632 Summer Darby I			Date of Receipt
	Mailing Address 6632 Summer Darby I City	-ane State	Zip Code	1 1 2 0 0 9 Transaction ID: 32282905
	<u>Charlotte</u>	NC	28270-2811	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		374.00
	Name of Employer Charlotte Radiology	Occupation Diagnost	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
- 3.	Full Name (Last, First, Middle Initial) Dr. John D. Howard			Date of Receipt
	Mailing Address Charlotte Radiology PO Box 36937			11 11 2009
	City	State	Zip Code	Transaction ID: 32282906
	Charlotte FEC ID number of contributing federal political committee.	NC C	28236-6937	Amount of Each Receipt this Period 374.00
	Name of Employer Charlotte Radiology	Occupation Diagnost	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
_ :	Full Name (Last, First, Middle Initial) Dr. Jeremy Jones			Date of Receipt
	Mailing Address 1644 Windy Ridge Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 32282907
	Charlotte	NC	28270-1107	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		374.00
	Name of Employer Mount Sinai Medical Center	Occupation Diagnost	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)	1		1122.00
T	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
\[\]	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Assoc	iation Politic	cal Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Michael Kelley Mailing Address 2500 Maynard Rd			Date of Receipt
				11 1 2009
	City <u>C</u> harlotte	State NC	Zip Code 28270-0754	Transaction ID: 32282908 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		374.00
	Name of Employer Charlotte Radiology	Occupation Diagnost	on tic Radiologist	
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Dr. Peter Kravath			Date of Receipt
	Mailing Address 127 N Tryon St Apt 40	11 1 2009		
	City	State	Zip Code	Transaction ID: 32282909
	Charlotte FEC ID number of contributing federal political committee.	NC C	28202-1107	Amount of Each Receipt this Period 374.00
	Name of Employer Charlotte Radiology	Occupation Diagnost	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
С. С.	Full Name (Last, First, Middle Initial) Dr. Fred Lassiter			Date of Receipt
	Mailing Address Charlotte Radiology PO Box 36937			11 1 1 1 2009
	City <u>Charlotte</u>	State NC	Zip Code 28236-6937	Transaction ID: 32282910 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		374.00
	Name of Employer Charlotte Radiology	Occupation Diagnost	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			1122.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 85 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations and S or for commercial purposes, other than using the	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Barry McGinnis Mailing Address Charlotte Radiology P PO Box 36937 City Charlotte FEC ID number of contributing federal political committee. Name of Employer Charlotte Radiology PA	State NC C Occupation	Zip Code 28236-6937	Date of Receipt M M M
Receipt For: Primary General Other (specify)	, '	ic Radiologist Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Robert Mittl, JR Mailing Address 4733 Coburn Court			Date of Receipt 1 1 1 2 0 0 9
City	State	Zip Code	Transaction ID: 32282912
Charlotte FEC ID number of contributing federal political committee.	NC C	28277-2593	Amount of Each Receipt this Period 374.00
Name of Employer Charlotte Radiology	,	ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 878.00	
Full Name (Last, First, Middle Initial) Dr. James Oliver, III			Date of Receipt
Mailing Address 4015 Winterberry PI			M M / D D / Y Y Y Y Y Y Y 1 1 1 1 2 0 0 9
City <u>C</u> harlotte	State NC	Zip Code 28210-7329	Transaction ID: 32282913
FEC ID number of contributing federal political committee.	C	20210-1329	Amount of Each Receipt this Period 374.00
Name of Employer Charlotte Radiology, P.A.	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	- t	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)			1122.00

3030 Latrobe Dr City State Zip Code Charlotte NC 28211-4866 FEC ID number of contributing federal political committee. Name of Employer Charlotte Radiology, P.A. Diagnostic Radiologist Receipt For: Primary General 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	R: PAGE 16 / 85
Dr. Mary Pomeroy Mailing Address 2625 Rolling Hills Dr City State Zip Code Monroe NC 28110-8408 FEG ID number of contributing federal political committee. Name of Employer Charlotte Radiology Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Richard Redvanly Mailing Address 4315 Gosford Pl City Charlotte NC 28277-4546 FEG ID number of contributing federal political committee. City Charlotte NC 28277-4546 FEG ID number of contributing federal political committee. Name of Employer Charlotte Radiology Charlotte Radiology Charlotte Radiology Charlotte Radiology Charlotte Radiology Sa303 Latrobe Dr City Charlotte Radiology Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Andrew Schneider Mailing Address Charlotte Radiology 3030 Latrobe Dr City Charlotte NC 28211-4866 FEC ID number of contributing federal political committee. City Charlotte NC 28211-4866 FEG ID number of contributing federal political committee. City Charlotte NC 28211-4866 FEC ID number of contributing federal political committee. NC 28211-4866 FEC ID number of contributing federal political committee. NC 28211-4866 FEG ID number of contributing federal political committee. NC 28211-4866 FEC ID number of contributing federal political committee. NC 28211-4866 FEC ID number of contributing federal political committee. NC 28211-4866 FEG ID number of contributing federal political committee. NC 28211-4866 FEG ID number of contributing federal political committee. NC 28211-4866 FEG ID number of contributing federal political committee. NC 28211-4866 FEG ID number of contributing federal political committee.	iciting contributions n such committee.
Monroe NC	1 2009
FEC ID number of contributing federal political committee. Name of Employer Charlotte Radiology Full Name (Last, First, Middle Initial) Dr. Richard Redvanly Mailing Address 4315 Gosford Pl City State Zip Code PFC ID number of contributing federal political committee. Name of Employer Charlotte Radiology Primary General Other (specify) ▼ State Zip Code NC 28277-4546 FEC ID number of contributing federal political committee. Name of Employer Charlotte Radiology Dr. Andrew Schneider Mailing Address Charlotte Radiology 3030 Lattrobe Dr City State Zip Code NC 28277-4546 Feceipt For: Primary General Other (specify) ▼ Date of Receipt Transaction ID: 3: Amount of Each Ri Pull Name (Last, First, Middle Initial) Dr. Andrew Schneider Mailing Address Charlotte Radiology 3030 Latrobe Dr City State Zip Code Milling Address Charlotte Radiology 3030 Latrobe Dr City State Zip Code NC 28211-4866 FEC ID number of contributing federal political committee. Cell Name of Employer Charlotte Radiology, P.A. Receipt For: Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 3: Amount of Each Ri Aggregate Year-to-Date ▼ Date of Receipt Milling Address Charlotte Radiology 3030 Latrobe Dr City State Zip Code NC 28211-4866 Amount of Each Ri Aggregate Year-to-Date ▼ Primary General	
Receipt For:	374.00
Dr. Richard Redvanly Mailing Address 4315 Gosford PI City Charlotte NC 28277-4546 FEC ID number of contributing federal political committee. Name of Employer Charlotte Radiology Receipt For: Primary Other (specify) ▼ Pull Name (Last, First, Middle Initial) Dr. Andrew Schneider Mailing Address Charlotte Radiology State Zip Code Aggregate Year-to-Date ▼ Primary Date of Receipt Transaction ID: 33 Amount of Each Ri Po D 1 1 Transaction ID: 33 Amount of Each Ri Po D 1 1 Transaction ID: 33 Amount of Each Ri Po D 1 1 Transaction ID: 33 Amount of Each Ri Primary General Occupation Diagnostic Radiologist Receipt For: NC 28211-4866 Receipt For: Name of Employer Charlotte Name of Employer Charlotte Radiology, P.A. Diagnostic Radiologist Receipt For: Primary General Occupation Diagnostic Radiologist Receipt For: Primary General	
City State Zip Code NC 28277-4546 FEC ID number of contributing federal political committee. Name of Employer Charlotte Radiology Primary General Other (specify) ▼ City State Zip Code NC 28277-4546 Pagregate Year-to-Date ▼ Date of Receipt For: Primary General Other (specify) ▼ Potential Primary General Other (specify) ▼ City State Zip Code NC 28211-4866 FEC ID number of contributing federal political committee. Name of Employer Charlotte Radiology, P.A. Name of Employer Charlotte Radiology, P.A. Name of Employer Charlotte Radiology, P.A. Primary General Occupation Diagnostic Radiologist Receipt For: Primary General From Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	
Charlotte FEC ID number of contributing federal political committee. Name of Employer Charlotte Radiology Receipt For: Primary General Other (specify) ▼ Pull Name (Last, First, Middle Initial) Dr. Andrew Schneider Mailing Address Charlotte Radiology 3030 Latrobe Dr City State Zip Code Charlotte NC 28211-4866 FEC ID number of contributing federal political committee. Name of Employer Charlotte Radiology, P.A. Name of Employer Charlotte Radiology, P.A. Name of Employer Charlotte Radiology, P.A. Primary General Amount of Each Receipt Date of Receipt Transaction ID: 3: Amount of Each Receipt Amount of Each Receipt Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	
Name of Employer Charlotte Radiology Receipt For: Primary Other (specify) ▼ Pull Name (Last, First, Middle Initial) Dr. Andrew Schneider Mailing Address Charlotte Radiology 3030 Latrobe Dr City Charlotte NC 28211-4866 FEC ID number of contributing federal political committee. Name of Employer Charlotte Radiology Amount of Each Ro C C Name of Employer Charlotte Radiology Charlotte Radiology Amount of Each Ro C Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 3: Amount of Each Ro C Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	
Diagnostic Radiologist Receipt For: Primary	374.00
Receipt For: Primary General Other (specify) ▼ Pagregate Year-to-Date ▼ 900.00 Full Name (Last, First, Middle Initial) Dr. Andrew Schneider Mailing Address Charlotte Radiology 3030 Latrobe Dr City Charlotte NC 28211-4866 FEC ID number of contributing federal political committee. Name of Employer Charlotte Radiology, P.A. Name of Employer Charlotte Radiology, P.A. Receipt For: Primary General Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	
Dr. Andrew Schneider Mailing Address Charlotte Radiology 3030 Latrobe Dr City State Zip Code Charlotte NC 28211-4866 FEC ID number of contributing federal political committee. Name of Employer Charlotte Radiology, P.A. Name of Employer Charlotte Radiology, P.A. Primary General Date of Receipt M M M / D D D D D D D D D D D D D D D D	
3030 Latrobe Dr City State Zip Code Charlotte NC 28211-4866 FEC ID number of contributing federal political committee. Name of Employer Charlotte Radiology, P.A. Name of Employer Charlotte Radiology, P.A. Diagnostic Radiologist Receipt For: Primary General 1 1 1 1 1 C Transaction ID: 32 Amount of Each Re Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	
City State Zip Code Charlotte NC 28211-4866 FEC ID number of contributing federal political committee. Name of Employer Charlotte Radiology, P.A. Receipt For: Primary General State Zip Code NC 28211-4866 Amount of Each Receipt State Receipt For: Aggregate Year-to-Date ▼	1 Y Y Y Y Y Y Y 2 0 0 9
FEC ID number of contributing federal political committee. Name of Employer Charlotte Radiology, P.A. Receipt For: Primary General C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	32282916
Name of Employer Charlotte Radiology, P.A. Receipt For: Primary General Occupation Diagnostic Radiologist Aggregate Year-to-Date FOO OO	Receipt this Period
Receipt For: Primary General Aggregate Year-to-Date FOO OO	374.00
Primary General 500 00	
Other (specify) ▼	
SUBTOTAL of Receipts This Page (optional)	1122.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 85 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any persong the name and address of any political committee to sociation Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Rajiv Sharma		Date of Receipt
Mailing Address 1228 Firethorne Cl	ub Drive State Zip Code	11 11 2009
Waxhaw	NC 28173-6553	Transaction ID: 32282917 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 25176 5666	374.00
Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Dale Shaw Mailing Address 3601 Sharon Rd		Date of Receipt
		11 11 2009
City	State Zip Code	Transaction ID: 32282918
Charlotte FEC ID number of contributing federal political committee.	NC 28211-3325	Amount of Each Receipt this Period 374.00
Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Joseph Staab		Date of Receipt
Mailing Address 160 Pitch Pine Ln		M M / D D / Y Y Y Y Y Y 1 Y 1 1 1 1 2 0 0 9
City	State Zip Code	Transaction ID: 32282919
Pinehurst FEC ID number of contributing federal political committee.	NC 28374-9217	Amount of Each Receipt this Period 374.00
Name of Employer Self-Employed	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	al)	1122.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 85 (check only one) X
or for	nformation copied from such Reports and S commercial purposes, other than using the AME OF COMMITTEE (In Full) merican College of Radiology Assoc	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
4. <u>D</u>	ull Name (Last, First, Middle Initial) r. Walter Steele	1		Date of Receipt
_	ailing Address 2115 Foxcroft Woods	State	Zip Code	1 1 2 0 0 9 Transaction ID: 32282920
	charlotte	NC	28211-2666	Amount of Each Receipt this Period
FI	EC ID number of contributing deral political committee.	C		446.00
N C	ame of Employer harlotte Radiology	Occupatio Diagnost	n tic Radiologist	
R	eceipt For: Primary General Other (specify) ▼	,	e Year-to-Date ▼ 596.00	
3. <u>D</u>	ull Name (Last, First, Middle Initial) r. Jeffrey Stein			Date of Receipt
IVI	ailing Address 7047 Whitemarsh Ct			11 1 2009
	ity	State	Zip Code	Transaction ID: 32282921
<u>C</u>	harlotte	NC	28210-4901	Amount of Each Receipt this Period
fe	EC ID number of contributing deral political committee.	С		374.00
N C	ame of Employer harlotte Radiology	Occupatio Diagnost	_{on} tic Radiologist	
R	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	ull Name (Last, First, Middle Initial) r. Christopher Ullrich			Date of Receipt
M	ailing Address Charlotte Radiology P PO Box 36937	'A		11 / 11 / 2009
	ity	State	Zip Code	Transaction ID: 32282922
FI	Charlotte EC ID number of contributing deral political committee.	C	28236-6937	Amount of Each Receipt this Period 374.00
N C	ame of Employer harlotte Radiology PA	Occupatio Diagnost	n tic Radiologist	
R	eceipt For: Primary General Other (specify) ▼	, ' 	e Year-to-Date ▼ 1000.00	
- Cur	RTOTAL of Receipts This Page (optional)	1		1194.00

	EDULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for co	rmation copied from such Reports and St mmercial purposes, other than using the E OF COMMITTEE (In Full) erican College of Radiology Associa	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. <u>Dr. T</u>	Name (Last, First, Middle Initial) erry Wallace ng Address Charlotte Radiology PO Box 36937			Date of Receipt 1 1 1 1 1 2 0 0 9
City	1 O Box 00007	State	Zip Code	Transaction ID: 32282923
<u>Cha</u>	rlotte	NC	28236-6937	Amount of Each Receipt this Period
	ID number of contributing al political committee.	C		266.00
	e of Employer lotte Radiology	Occupation Diagnost	n ic Radiologist	
Rece	ipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 356.00]
<u>Dr. W</u>	Name (Last, First, Middle Initial) /illiam Carey Werthmuller			Date of Receipt
	ng Address Charlotte Radiology PO Box 36937		71.0	11 1 1 2009
City	rlotte	State NC	Zip Code 28236-6937	Transaction ID: 32282924
FEC	ID number of contributing al political committee.	C	20230-0937	Amount of Each Receipt this Period 374.00
Name Char	e of Employer lotte Radiology	Occupation Diagnost	n ic Radiologist	
Rece	ipt For: Primary General Other (specify) ♥	Aggregate	Year-to-Date ▼ 500.00]
	Name (Last, First, Middle Initial) pel Wissing			Date of Receipt
Maili	ng Address Charlotte Radiology PO Box 36937			11 / 11 / 2009
City		State	Zip Code	Transaction ID: 32282925
FEC	rlotte ID number of contributing al political committee.	NC C	28236-6937	Amount of Each Receipt this Period 374.00
Name Char	e of Employer lotte Radiology	Occupation Diagnost	n ic Radiologist	7
Rece	ript For: Primary General Other (specify) ▼		Year-to-Date ▼ 740.00	
CUPTO	TAL of Receipts This Page (optional)			1014.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Asso	ciation Political Action Committee	_
Full Name (Last, First, Middle Initial) Dr. James Zuger		Date of Receipt
Mailing Address 6011 Bentway Dr City	State Zip Code	1 1
<u>Charlotte</u>	NC 28226-8052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	374.00
Name of Employer Charlotte Radiology PA	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Janet Storella Mailing Address 6515 Fallwind Ln		Date of Receipt
Maining Address 05151 anwind En		11 2009
City	State Zip Code	Transaction ID: 32282927
Bethesda	MD 20817-4941	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Drs Grover, Christie & Me- rritt	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00	
Full Name (Last, First, Middle Initial) Dr. James Jelinek		Date of Receipt
Mailing Address Washington Hospital 110 Irving St NW BA	Center 94	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 32282928
Washington	DC 20010-2975	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	45.00
Name of Employer Center Radiology	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	495.00]
SUBTOTAL of Receipts This Page (optional)		459.00
TOTAL This Period (last page this line number	·	

 	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and S	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 85 (check only one) X
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associ	name and ad	dress of any political committee to	o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Dr. Randall Snyder, III			Date of Receipt
	Mailing Address 7 Sheffield Ct			11 1 12 2009
	City	State	Zip Code	Transaction ID: 32288008
	Medford	NJ	08055-8301	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer South Jersey Radiology As-	Occupatio		
	sociates, P.Á Receipt For:	, '	tic Radiologist	
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
- 3.	Full Name (Last, First, Middle Initial) Dr. Roger Cronk			Date of Receipt
	Mailing Address 1505 Eagle Ridge Rd I	NE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 32300906
	Albuquerque	NM	87122-1156	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer X-Ray Associates of NM, PC	Occupatio Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
-).	Full Name (Last, First, Middle Initial) Dr. Kevin Cregan	<u> </u>		Date of Receipt
	Mailing Address Wayne Radiologists 2700 Medical Office Pl	lace		1 1 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 32301362
	Goldsboro	NC	27534-9460	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Wayne Radiologists	Occupatio Diagnost	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
ſ	SUBTOTAL of Receipts This Page (optional)	<u> </u>)	1000.00
┟				

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	for	e separate schedule(s) each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 22 / 85 (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may not b	ne sold or used by any perso of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology As	sociation Political Ac	tion Committee	
Full Name (Last, First, Middle Initial) Dr. James Sloves			Date of Receipt
Mailing Address 4870 W Pinewild F	Rd		1 1 1 5 2 0 0 9
City Reno		Zip Code	Transaction ID: 32302082
FEC ID number of contributing federal political committee.	C	39511-2779	Amount of Each Receipt this Period 250.00
Name of Employer Holy Cross Hospital	Occupation Diagnostic Ra	diologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-		
Full Name (Last, First, Middle Initial) Dr. Stephen Koller			Date of Receipt
Mailing Address 1119 Basin Harbo	^r Rd		1 1 1 5 2 0 0 9
City Bridport		Zip Code 05734-9570	Transaction ID: 32302083
FEC ID number of contributing federal political committee.	C	33734-9370	Amount of Each Receipt this Period 100.00
Name of Employer Middleburg Radiologists PLLC	Occupation Diagnostic Ra	diologist	
Receipt For: Primary General Other (specify)	Aggregate Year-	to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Shane Kraske			Date of Receipt
Mailing Address 37 Columbine Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Iowa City		Zip Code 52246-8716	Transaction ID: 32302084
FEC ID number of contributing federal political committee.	C	32240-0710	Amount of Each Receipt this Period 250.00
Name of Employer Radiologic Medical Servic- es, Coralvill	Occupation Diagnostic Ra		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-	to-Date ▼ 1250.00	
	al)		600.00

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	for e	separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 23 / 85 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may not be the name and address of	sold or used by any perso any political committee to	
NAME OF COMMITTEE (In Full) American College of Radiology As	sociation Political Action	on Committee	
Full Name (Last, First, Middle Initial) Dr. David Harry			Date of Receipt
Mailing Address 136 Highview Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip	Code	Transaction ID: 32302085
Stephenson	VA 22	656-2105	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Winchester Medical Center	Occupation Diagnostic Rad	iologist	7
Receipt For:	Aggregate Year-to		7
Primary General Other (specify) ▼		1000.00]
Full Name (Last, First, Middle Initial) Dr. William Fife			Date of Receipt
Mailing Address 256 NW Pacific Gr	ove Dr		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip	Code	Transaction ID: 32302086
Beaverton	OR 97	006-8352	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer LAC/USC Hospital	Occupation Diagnostic Rad	iologist	7
Receipt For: Primary General Other (specify)	Aggregate Year-to	D-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Raymond Tu			Date of Receipt
Mailing Address 1539 27th St NW			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	•	Code	Transaction ID: 32302179
Washington	DC 20	007-3030	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Progressive Radiology	Occupation Diagnostic Rad	iologist	7
Receipt For:	Aggregate Year-to	o-Date V	
Primary General Other (specify) ▼		750.00	
			750.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 85 (check only one) X
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations and the commercial purposes.	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Dr. Randall S. Winn Mailing Address Reading Hospital & N PO Box 16052			Date of Receipt 11 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 32305160
	Reading FEC ID number of contributing federal political committee.	C	19612-6052	Amount of Each Receipt this Period 250.00
	Name of Employer West Reading Radiology Assoc Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	_ ' _ <u>`</u> _	tic Radiologist e Year-to-Date ▼ 750.00	
3.	Full Name (Last, First, Middle Initial) Dr. Bradford Richmond Mailing Address Cleveland Clinic Four 9500 Euclid Ave	ndation		Date of Receipt
	City	State	Zip Code	Transaction ID: 32305161
	Cleveland	OH	44195-5021	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer Cleveland Clinic Foundati- on	<u> </u>	tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 440.00	
	Full Name (Last, First, Middle Initial) Dr. John Rogers Mailing Address 802 West Gap Creek	Road		Date of Receipt
	City	State	Zip Code	Transaction ID: 32305162
	Greer	SC	29651-5065	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		42.00
	Name of Employer Greenville Radiology		tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 462.00	
	SUBTOTAL of Receipts This Page (optional)			332.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pers he name and address of any political committee to	
American College of Radiology Asso	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Eric Tocci		Date of Receipt
Mailing Address 437 Triton Road City	State Zip Code	11 15 2009
Ormond Beach	FL 32176-5459	Transaction ID: 32305163 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Radiology Associates of Daytona Beach	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Charles Williams, III		Date of Receipt
Mailing Address 2117 Cleveland Stre		11 1 1 5 2 0 0 9
City	State Zip Code	Transaction ID: 32305164
Greenville	SC 29607-3649	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer Greenville Radiology, PA	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	550.00	
Full Name (Last, First, Middle Initial) Dr. Scott Klioze		Date of Receipt
Mailing Address 7 Cypress Hollow Ln		1 1 1 5 2 0 0 9
City	State Zip Code	Transaction ID: 32305165
Ormond Beach	FL 32174-3047	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Radiology Associates of Daytona Beach	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	
SURTOTAL of Receipts This Page (optional)		200.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	(3)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 85 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and addre	ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Robert Newman Mailing Address 913 Southview PI N	E		Date of Receipt
City Lenoir	State NC	Zip Code 28645-3755	Transaction ID: 32305219 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	C		50.00
Name of Employer Lenoir Radiology Receipt For: Primary General Other (specify) ▼	Diagnostic	Radiologist /ear-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) Dr. Andrew Beloni Mailing Address 5624 Laurium Rd			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 32305220
Charlotte	NC	28226-5610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		45.00
Name of Employer Charlotte Radiology		Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 495.00]
Full Name (Last, First, Middle Initial) Dr. Ira Adler	•		Date of Receipt
Mailing Address 879 Lexington Dr			11 15 2009
City	State	Zip Code	Transaction ID: 32305221
Greenville FEC ID number of contributing federal political committee.	C	27834-0549	Amount of Each Receipt this Period 40.00
Name of Employer Eastern Radiologists	Occupation Diagnostic	Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Y	'ear-to-Date ▼ 440.00	
SUBTOTAL of Receipts This Page (optional)		135.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 85 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person g the name and address of any political committee to sociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
American college of hadiology As	Sociation Folitical Action Committee	
Full Name (Last, First, Middle Initial) Dr. David Buck		Date of Receipt
Mailing Address 272 Harrison Rd		1 1 1 5 2 0 0 9
City	State Zip Code	Transaction ID: 32305222
Turtle Creek	PA 15145-1042	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.42
Name of Employer Greensburg X-Ray Associat-	Occupation	
es Receipt For:	Diagnostic Radiologist Aggregate Year-to-Date ▼	\dashv
Primary General Other (specify) ▼	Aggregate Year-to-Date ¥	
Full Name (Last, First, Middle Initial)		Date of Propriet
Dr. Timothy Crummy Mailing Address 2509 Middleton Be	ach Rd	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 32305223
<u>Middleton</u>	WI 53562-2912	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	36.50
Name of Employer Madison Radiologists	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 478.50	
Full Name (Last, First, Middle Initial) Dr. Roger Thomas		Date of Receipt
Mailing Address 1636 Anita Ln		11 15 2009
City	State Zip Code	Transaction ID: 32305224
Newport Beach	CA 92660-4804	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Newport Harbor Radiology	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	
SURTOTAL of Receipts This Page (option	al)	106.92

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 85 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Andrew Wu Mailing Address 8729 Valentine Ct			Date of Receipt
City Raleigh	State NC	Zip Code 27615-5830	Transaction ID: 32305225 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Wake Radiology	Occupation	n	40.00
Wake Radiologý Receipt For: Primary General Other (specify) ▼	Diagnost	ic Radiologist 9 Year-to-Date ▼ 440.00	
Full Name (Last, First, Middle Initial) Dr. Terry Martin Mailing Address Rad Assoc of Biirm			Date of Receipt 1 1 1 5 2 0 0 9
2090 Columbiana F	30 Ste 4400 State	Zip Code	Transaction ID: 32305226
<u>Birmingham</u>	AL	35216-2152	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Rad Assoc of Biirmingham PC Receipt For:		ic Radiologist	
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00]
Full Name (Last, First, Middle Initial) Dr. Gilbert Parker, JR			Date of Receipt
Mailing Address 2763 Brownfield W	ay		11 1 15 2009
City	State	Zip Code	Transaction ID: 32305227
Sumter FEC ID number of contributing federal political committee.	SC	29150-2254	Amount of Each Receipt this Period 20.00
Name of Employer Sumter Radiological, P.A.	- '	ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 220.00	
SUBTOTAL of Receipts This Page (optional	al)		160.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Asso	Statements may not be sold or used by any person ne name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	Gallott Follical Action Committee	
Dr. Kent Lancaster		Date of Receipt
Mailing Address 3141 Sundance Path		11 15 2009
City	State Zip Code	Transaction ID: 32305228
Stevensville	MI 49127-9376	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer Radiology Associates of	Occupation Diagnostic Radiologist	
Berrie Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	462.00	
Full Name (Last, First, Middle Initial) Dr. Jugesh Cheema		Date of Receipt
Mailing Address 2466 Oak Bend Pl		M M / D D / Y Y Y Y Y Y 1 1 1 1 5 2 0 0 9
City	State Zip Code	Transaction ID: 32305230
Newburgh	IN 47630-8053	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer Medical Center of Delaware	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00	
Full Name (Last, First, Middle Initial) Dr. Paul Ellenbogen		Date of Receipt
Mailing Address 6612 Cliffbrook Dr		M M / D D / Y Y Y Y Y Y Y Y 1 1 1 1 5 2 0 0 9
City	State Zip Code	Transaction ID: 32305231
Dallas	TX 75254-8613	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.34
Name of Employer Southwest Imaging & Inter- ven specialis	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2291.74	
SUBTOTAL of Receipts This Page (optional)		310.34

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS Any information copied from such Benorts a	Use separate schedule(s) for each category of the Detailed Summary Page nd Statements may not be sold or used by any persor	FOR LINE NUMBER: PAGE 30 / 85 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	g the name and address of any political committee to s	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Douglas Montgomery		Date of Receipt
Mailing Address 45 Glenwood Rd		11 15 2009
City	State Zip Code	Transaction ID: 32305232
West Hartford	CT 06107-1506	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Jefferson Radiology	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	
Full Name (Last, First, Middle Initial) Dr. Jorge Albin		Date of Receipt
Mailing Address 645 Mulberry Ln		1 1 1 5 2 0 0 9
City	State Zip Code	Transaction ID: 32305235
Bellaire	TX 77401-3803	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.67
Name of Employer Greater Houston Radiology Associates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 416.70	
Full Name (Last, First, Middle Initial) Dr. Demetrius Morros		Date of Receipt
Mailing Address 7418 Ridgecrest C	ourt Rd	1 1 1 5 2 0 0 9
City	State Zip Code	Transaction ID: 32305236
<u>Birmingham</u>	AL 35242-0525	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer Birmingham Radiological Group P.C.	Occupation Diagnostic Radiologist]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	916.74	
SUBTOTAL of Receipts This Page (option	al)	150.01

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 85 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associ	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ 4 .	Full Name (Last, First, Middle Initial) Dr. Paul Lampert Mailing Address 2240 S. Elks Lane Unit 55			Date of Receipt 1 1 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 32305237
	Yuma FEC ID number of contributing federal political committee.	AZ C	85364-6284	Amount of Each Receipt this Period 125.00
	Name of Employer MDIG Receipt For: Primary General Other (specify) ▼	,	n cic Radiologist e Year-to-Date ▼ 1375.00	
- 3.	Full Name (Last, First, Middle Initial) Dr. Daniel Cohen Mailing Address 1480 Brookfield Road			Date of Receipt 1 1 1 5 2 0 0 9
	City	State	Zip Code	1 1 1 5 2 0 0 9 Transaction ID: 32305238
	Yardley FEC ID number of contributing federal political committee.	C	19067-3930	Amount of Each Receipt this Period 40.00
	Name of Employer Radiology Affiliates of Central NJ Receipt For: Primary General Other (specify)	,	n cic Radiologist e Year-to-Date ▼ 440.00	
_ }.	Full Name (Last, First, Middle Initial) Dr. Raja Cheruvu			Date of Receipt
	Mailing Address 165 Via Foresta Ln			11 15 2009
	City Williamsville	State NY	Zip Code 14221-1984	Transaction ID: 32305239
	FEC ID number of contributing federal political committee.	C	14221-1904	Amount of Each Receipt this Period 50.00
	Name of Employer Windsong Radiology Group	Occupatio	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1450.00	
	SUBTOTAL of Receipts This Page (optional)		······	215.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any pers the name and address of any political committee to sociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Kevin Smith Mailing Address Regional Diagnosti		Date of Receipt
1406 6th Ave N	State Zip Code	1 1 1 5 2 0 0 9 Transaction ID: 32305244
Saint Cloud FEC ID number of contributing federal political committee.	MN 56303-1900	Amount of Each Receipt this Period 312.50
Name of Employer Regional Diagnostic Radio- logy Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 2187.50	
Full Name (Last, First, Middle Initial) Dr. Raul de la Vega, III Mailing Address 2936 Grampian Dr		Date of Receipt 1 1 1 1 5 2 0 0 9
City	State Zip Code	Transaction ID: 32305245
Gastonia	NC 28054-6402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	67.50
Name of Employer Shelby Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 472.50	
Full Name (Last, First, Middle Initial) Dr. John Renz		Date of Receipt
Mailing Address Mobile Infirmary Mobile PO Box 2144	edical Center	11 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Mobile</u>	State Zip Code AL 36652-2144	Transaction ID: 32305247 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Mobile Infirmary Medical Center	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional	l)	430.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 85 (check only one) X
Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may the name and add	not be sold or used by any persodress of any political committee to	
American College of Radiology Ass	sociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Raymond A. Armstrong			Date of Receipt
Mailing Address Radiology of Hunts 2006 Franklin St SI			11 1 15 / Y Y Y Y Y
City	State	Zip Code	Transaction ID: 32305250
<u>Huntsville</u>	AL	35801-4537	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Baptist Medical Ctr-Montc- lair	Occupation Diagnost	n ic Radiologist	
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼		700.00	
Full Name (Last, First, Middle Initial) Dr. Amy Sobel			Date of Receipt
Mailing Address 11104 Creek Point	Dr		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 32305252
Matthews	NC	28105-7702	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer Charlotte Radiology	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) Dr. Kevin O'Brien			Date of Receipt
Mailing Address St Johns Macomb 11800 E 12 Mile Ro			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 32305254
Warren	MI	48093-3494	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer Diagnostic Radiology Cons- ultants. PC	Occupation Diagnost	n ic Radiologist	7
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	440.00	
SUBTOTAL of Receipts This Page (optional			165.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 85 (check only one) X	
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions	
American College of Radiology Ass	ociation Political Action Committee		
Full Name (Last, First, Middle Initial) Dr. William Deeter, III		Date of Receipt	
Mailing Address 14 Ryedale Ct City	State Zip Code	1 1 1 5 2 0 0 9 Transaction ID: 32305257	
Greenville	SC 29615-6037	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	41.67	
Name of Employer Greenville Radiology	Occupation		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 458.37		
Full Name (Last, First, Middle Initial) Dr. Rita Freimanis		Date of Receipt	
Mailing Address Wake Forest Univ S Medical Center Blvd		11 / 15 / Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 32305258	
Winston Salem	NC 27157-1088	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С	25.00	
Name of Employer Wake Forest Univ Sch of Medicine	Occupation Diagnostic Radiologist		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]	
Full Name (Last, First, Middle Initial) Dr. Robert Mittl, JR		Date of Receipt	
Mailing Address 4733 Coburn Court		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 32305259	
Charlotte	NC 28277-2593	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	42.00	
Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 920.00		
SUBTOTAL of Receipts This Page (optional)	108.67	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 85 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	d Statements may not be sold or used by any personal the name and address of any political committee to ociation Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. James Hiken Mailing Address 7109 Cove Pointe F City Prospect FEC ID number of contributing	State Zip Code KY 40059-9680	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
federal political committee. Name of Employer Diag. Imaging Alliance of Louisville Receipt For: Primary General Other (specify)	Occupation Diagnostic Radiologist Aggregate Year-to-Date 378.00	42.00
Full Name (Last, First, Middle Initial) Dr. Neil Kramer Mailing Address 1621 Fort Duquesn		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Cherry Hill FEC ID number of contributing federal political committee.	State Zip Code NJ 08003-2708	Amount of Each Receipt this Period 500.00
Name of Employer South Jersey Radiology Associates Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Dr. Helaina Semmler Mailing Address 1307 White Horse F	Rd Sto A102	Date of Receipt
City Voorhees	State Zip Code NJ 08043-2100	Transaction ID: 32305484 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer South Jersey Radiology As- sociates Receipt For:	Occupation Diagnostic Radiologist Aggregate Year-to-Date	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	1042.00

	EDULE A (FEC Form 3X) IIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 85 (check only one) X
or for c	ormation copied from such Reports and S commercial purposes, other than using the ME OF COMMITTEE (In Full) nerican College of Radiology Assoc	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Dr. 1	Name (Last, First, Middle Initial) Barry Shurman ling Address 201 Windsor Ave	State	Zip Code	Date of Receipt M
Elk FEC	ins Park CID number of contributing eral political committee.	PA C	19027-3510	Amount of Each Receipt this Period 500.00
SOC	ne of Employer uth Jersey Radiology As- iates seipt For: Primary General Other (specify)	, ' <u> </u>	n cic Radiologist e Year-to-Date ▼	
Dr. 1	Name (Last, First, Middle Initial) Amir Batouli ling Address 324 Lantern Lane	·		Date of Receipt 1 1 1 7 2 0 0 9
City <u>Ch</u>	ambersburg	State PA	Zip Code 17201-3299	Transaction ID: 32305486 Amount of Each Receipt this Period
	CID number of contributing eral political committee.	C		260.00
Cha <u>ciat</u>	ne of Employer ambersburg Imaging Asso- es seipt For: Primary General Other (specify)	, '	n cic Radiologist e Year-to-Date ▼ 260.00	
	Name (Last, First, Middle Initial) David Brill			Date of Receipt
	ling Address 1389 4th Ave			11 17 2009
City Ch:	ambersburg	State PA	Zip Code 17201-8147	Transaction ID: 32305487 Amount of Each Receipt this Period
FEC	C ID number of contributing eral political committee.	C	172010147	250.00
Cha <u>ciat</u>		, ' 	ic Radiologist	
Rec	eeipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBT	OTAL of Receipts This Page (optional)	1		1010.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Henry Ching Mailing Address 854 Rosewood Ct		Date of Receipt
Mailing Address 854 Rosewood Ct City	State Zip Code	1 1 1 7 2 0 0 9 Transaction ID: 32305490
Chambersburg	PA 17201-2891	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	260.00
Name of Employer Chambersburg Imaging Asso- ciates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) Dr. Peter J.W. Fang		Date of Receipt
Mailing Address 930 Dewberry Court		11 1 7 7 2009
City	State Zip Code	Transaction ID: 32305491
Chambersburg	PA 17201-2870	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	260.00
Name of Employer Chambersburg Imaging Asso- ciates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) Dr. Robert Pyatt, JR		Date of Receipt
Mailing Address 1391 Hearthside Dr		M M / D D / Y Y Y Y Y Y 1 1 1 7 2 0 0 9
City	State Zip Code	Transaction ID: 32305494
Chambersburg	PA 17201-3389	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	260.00
Name of Employer Chambersburg Imaging Asso- ciates	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	260.00	
SUBTOTAL of Receipts This Page (optional)		780.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	K)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 85 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Philip J. Sabri Mailing Address PO Box 693			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Chambersburg FEC ID number of contributing federal political committee.	State PA	Zip Code 17201-0693	Transaction ID: 32305497 Amount of Each Receipt this Period 260.00
Name of Employer Chambersburg Imaging Associates Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		n ic Radiologist Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) Dr. Michael Shivers Mailing Address P O Box 693			Date of Receipt
City	State	Zip Code	Transaction ID: 32305498
Chambersburg FEC ID number of contributing federal political committee.	C	17201-0693	Amount of Each Receipt this Period 260.00
Name of Employer Chambersburg Imaging Assoc PC Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		n ic Radiologist Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) Dr. Niteen Sukerkar			Date of Receipt
Mailing Address 950 Dewberry Ct			11 17 2009
City	State	Zip Code	Transaction ID: 32305499
Chambersburg FEC ID number of contributing federal political committee.	C	17201-2870	Amount of Each Receipt this Period 260.00
Name of Employer Chambersburg Imaging Asso- ciates Receipt For:		n ic Radiologist • Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate	260.00	
SUBTOTAL of Receipts This Page (optional))		780.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 85 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass			
Full Name (Last, First, Middle Initial) Dr. Thane Toe Thane			Date of Receipt
Mailing Address P O Box 693			11 17 2009
City Chambersburg	State PA	Zip Code 17201-0693	Transaction ID: 32305500 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	17201 0000	260.00
Name of Employer Chambersburg Imaging Asso- ciates	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) Dr. Harold White			Date of Receipt
Mailing Address 2477 Sourek Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Akron	State OH	Zip Code 44333-2928	Transaction ID: 32305512 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	11000 2020	500.00
Name of Employer Radiology & Imaging Servi- ces, Inc.	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Harold Jones, JR			Date of Receipt
Mailing Address 2806 Bellevue Ave			11 17 2009
City	State	Zip Code	Transaction ID: 32305514
Augusta FEC ID number of contributing federal political committee.	GA C	30909-3804	Amount of Each Receipt this Period 500.00
Name of Employer Brown and Associates	Occupatio	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	I		1260.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associ	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
7 American conege of Hadiology Associ		ar Action Committee	
Full Name (Last, First, Middle Initial) Dr. Forrest Walker			Date of Receipt
Mailing Address 918 Johns Rd.			11 7 17 2009
City	State	Zip Code	Transaction ID: 32305515
Augusta	GA	30904-6102	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer Brown and Associates	Occupatio Diagnost	n ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) Dr. Michael Longe	l		Date of Receipt
Mailing Address 305 River Wind Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 32305516
North Augusta	SC	29841-6092	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer Brown and Associates	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Henry Alperin			Date of Receipt
Mailing Address 1 Eagleton Ct			M M / D D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1
City	State	Zip Code	Transaction ID: 32305522
<u>Augusta</u>	GA	30909-1803	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Brown and Associates	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)			1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 85 (check only one)
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology As:	sociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Jose Bauza			Date of Receipt
Mailing Address 3880 Inverness Wa	ay		M M / D D / Y Y Y Y Y Y 1 1 1 1 7 2 0 0 9
City	State	Zip Code	Transaction ID: 32305523
Martinez FEC ID number of contributing federal political committee.	GA C	30907-9433	Amount of Each Receipt this Period 500.00
Name of Employer Brown and Associates	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Steven Gregory Rogers			Date of Receipt
Mailing Address 3579 Oakmont Ct.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Martinez	State GA	Zip Code 30907-9518	Transaction ID: 32305524
FEC ID number of contributing federal political committee.	C	30307-3310	Amount of Each Receipt this Period 500.00
Name of Employer Brown and Associates	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	_ , '	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Warren Elam			Date of Receipt
Mailing Address 603 High Hampton	Drive		11 17 2009
City Martinez	State GA	Zip Code 30907-9149	Transaction ID: 32305525
FEC ID number of contributing federal political committee.	C	30907-9149	Amount of Each Receipt this Period 500.00
Name of Employer Brown and Associates	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	al)		1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Assor	ciation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Stuart Prather, JR		Date of Receipt
Mailing Address 2916 Stratford Dr City	State Zip Code	1 1 1 7 2 0 0 9 Transaction ID: 32305526
Augusta	GA 30909-3528	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Brown and Associates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. William Johnson		Date of Receipt
Mailing Address 2839 Lombardy Ct		11 17 2009
City	State Zip Code	Transaction ID: 32305530
<u>Augusta</u>	GA 30909-3901	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Brown and Associates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Lawrence Arrington		Date of Receipt
Mailing Address 137 Lakemont Dr		11 17 2009
City	State Zip Code	Transaction ID: 32305531
<u>Augusta</u>	GA 30904-3175	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer Brown and Associates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persoing the name and address of any political committee to association Political Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Larry Wells Mailing Address 3718 Sapphire D City Martinez FEC ID number of contributing federal political committee. Name of Employer Brown Radiology Associates Receipt For:	State Zip Code GA 30907-9572 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	Date of Receipt M M M
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. William Brooks, III Mailing Address PO Box 2172	500.00	Date of Receipt 1 1 7 2 0 0 9
City Augusta FEC ID number of contributing federal political committee. Name of Employer Brown Radiology Associates Receipt For: Primary General	State Zip Code GA 30903-2172 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 500.00	Transaction ID: 32305533 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Dr. James Davis Mailing Address 52 Chigoe Ln City Appling	State Zip Code GA 30802-3838	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Brown and Associates Receipt For: Primary General Other (specify)	Occupation Diagnostic Radiologist Aggregate Year-to-Date 500.00	500.00
SUBTOTAL of Receipts This Page (option	onal)	1500.00

SCHEDULE A (FEC Form	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than under the NAME OF COMMITTEE (In Full)	ts and Statements may not be sold or used by any persong the name and address of any political committee to Association Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Robert McKellar Mailing Address 3 Reid Ct City	State Zip Code	Date of Receipt 1 1 7 2 0 0 9 Transaction ID: 32305537
Augusta FEC ID number of contributing federal political committee.	GA 30909-3099	Amount of Each Receipt this Period 500.00
Name of Employer Brown and Associates Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Dr. Huey Bullock Mailing Address 3996 Hammond	ds Fry	Date of Receipt
City Evans FEC ID number of contributing federal political committee.	State Zip Code GA 30809-8025	Transaction ID: 32305538 Amount of Each Receipt this Period 500.00
Name of Employer Brown and Associates Receipt For: Primary General Other (specify)	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Lonnie Simmons	neran Medical Center	Date of Receipt
1900 South Ave City La Crosse	C02-002 State Zip Code WI 54601-5467	Transaction ID: 32364544 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	83.34
Name of Employer Gundersen Lutheran Clinic	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 916.74	
SUBTOTAL of Receipts This Page (op	tional)	1083.34

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 85 (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology As	<u> </u>		
Full Name (Last, First, Middle Initial) Dr. John Roth			Date of Receipt
Mailing Address 1693 Montane Dri	ve East		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 32365021
Golden FEC ID number of contributing federal political committee.	CO	80401-8094	Amount of Each Receipt this Period 250.00
Name of Employer Diversified Radiology of CO., P.C. Receipt For: Primary General Other (specify) ▼	- '	ic Radiologist Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Dr. Karl Chiang Mailing Address Eastern Radiologis 9 Doctors Park	sts Inc		Date of Receipt 1 1 2 0 2 0 9
City Greenville	State NC	Zip Code	Transaction ID: 32454831
FEC ID number of contributing federal political committee.	C	27834-2801	Amount of Each Receipt this Period 84.00
Name of Employer Eastern Radiologists Inc	Occupation	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 484.00	
Full Name (Last, First, Middle Initial) Dr. Dennis Johnson			Date of Receipt
Mailing Address Eastern Radiologis 9 Doctors Park	sts Inc		1 1 2 0 2 0 0 9
City Greenville	State NC	Zip Code 27834-2801	Transaction ID: 32454841
FEC ID number of contributing federal political committee.	C	27034*2001	Amount of Each Receipt this Period 84.00
Name of Employer Eastern Radiologists	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 484.00	
SUBTOTAL of Receipts This Page (option	I nal)		418.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 85 (check only one) X 11a
\ \ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. ∠ . .	Full Name (Last, First, Middle Initial) Dr. Joseph Lurito			Date of Receipt
	Mailing Address Eastern Radiologists 9 Doctors Park			11 20 7 2009
	City	State	Zip Code	Transaction ID: 32454848
	Greenville FEC ID number of contributing federal political committee.	NC C	27834-2801	Amount of Each Receipt this Period 84.00
	Name of Employer Eastern Radiologists	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 234.00	
3.	Full Name (Last, First, Middle Initial) Dr. Douglas Picton Mailing Address 1911 NC Highway 121			Date of Receipt
				11 20 2009
	City	State	Zip Code	Transaction ID: 32454857
	Greenville FEC ID number of contributing federal political committee.	NC C	27834-7187	Amount of Each Receipt this Period 84.00
	Name of Employer Eastern Radiologists	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 444.00]
	Full Name (Last, First, Middle Initial) Dr. Jeffrey Potter			Date of Receipt
	Mailing Address 1803 Bloomsbury Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 32454858
	Greenville FEC ID number of contributing federal political committee.	NC C	27858-9617	Amount of Each Receipt this Period 84.00
	Name of Employer Eastern Radiologists	Occupation Diagnost	n tic Radiologist	7
	Receipt For: Primary General Other (specify) ▼	, ' 	e Year-to-Date ▼ 484.00	
	SUBTOTAL of Receipts This Page (optional)			252.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Bruce Schroeder		Date of Receipt
Mailing Address 738 Lexington Dr	Charles 7th Condo	11 20 2009
City Greenville	State Zip Code NC 27834-0507	Transaction ID: 32454863 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer Eastern Radiologists	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 364.00	
Full Name (Last, First, Middle Initial) Dr. Roger Vithalani		Date of Receipt
Mailing Address 516 Chesapeake Pla	ce	11 20 7 2009
City	State Zip Code	Transaction ID: 32454870
Greenville	NC 27858-0678	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer Eastern Radiology	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 484.00	
Full Name (Last, First, Middle Initial) Dr. Janet Storella		Date of Receipt
Mailing Address 6515 Fallwind Ln		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 32468310
Bethesda	MD 20817-4941	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Drs Grover, Christie & Me- rritt	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	920.00	
SUBTOTAL of Receipts This Page (optional)		208.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 85 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Mark Bernardy Mailing Address 1031 Jimson Dr SE			Date of Receipt
City Conyers	State GA	Zip Code 30013-2064	Transaction ID: 32475448 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼		n ic Radiologist • Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Michael Raskin Mailing Address 144 N Sewalls Poin	t Rd		Date of Receipt 1 1 3 0 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
City	State	Zip Code	Transaction ID: 32475460
Sewalls Point	FL	34996-6502	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Michael M. Raskin, P.A.		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. William Allen, JR	'		Date of Receipt
Mailing Address 20050 NW 10th St			11 30 2009
City	State	Zip Code	Transaction ID: 32475461
Pratt FEC ID number of contributing federal political committee.	C	67124-7721	Amount of Each Receipt this Period 100.00
Name of Employer United Radiology Group	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional	l)		600.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16
or for	nformation copied from such Reports and S commercial purposes, other than using the	tatements maname and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\	AME OF COMMITTEE (In Full) merican College of Radiology Associ	ation Politic	al Action Committee	
4. <u>Dr</u>	ull Name (Last, First, Middle Initial) r. Roy Siragusa ailing Address 28 Winding Creek Wa	M.		Date of Receipt
Ci		State	Zip Code	1 1 3 0 2 0 0 9 Transaction ID: 32475462
	rmond Beach	FL	32174-6773	Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	С		250.00
Ra <u>Da</u>	ame of Employer adiology Associates of aytona Beach eceipt For: Primary General Other (specify) ▼	, '	tic Radiologist e Year-to-Date ▼ 1000.00	
3. <u>Dr</u>	ull Name (Last, First, Middle Initial) r. Bill Warren			Date of Receipt
IVI	ailing Address UWMC Box 357115			11 30 2009
Ci		State	Zip Code	Transaction ID: 32475463
S	eattle	WA	98195-7115	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		250.00
Na Ui	ame of Employer niversity of Washington	Occupatio Diagnost	n tic Radiologist	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	ull Name (Last, First, Middle Initial) r. H E. Longmaid, III			Date of Receipt
Ma	ailing Address 52 Harwich Rd			11 30 7 9 9
Ci		State	Zip Code	Transaction ID: 32475559
<u>C</u>	hestnut Hill	MA	02467-3023	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		41.67
Na De	ame of Employer eaconess Hospital	Occupatio Diagnost	n tic Radiologist	
Re	eceipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		458.37]
SUB	TOTAL of Receipts This Page (optional)			541.67
	AL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 85 (check only one)			
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) American College of Radiology Ass	ociation Politic	al Action Committee				
Full Name (Last, First, Middle Initial) Dr. Mark Alson			Date of Receipt			
City	State	Zip Code	1 1 3 0 2 0 0 9 Transaction ID: 32475560			
Fresno FEC ID number of contributing federal political committee.	CA	93711-1326	Amount of Each Receipt this Period 50.00			
Name of Employer Sierra Imaging Associates	Occupation Diagnost	n ic Radiologist				
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 600.00				
Full Name (Last, First, Middle Initial) Dr. Leonard Zawodniak			Date of Receipt			
Mailing Address 1439 Garrett Dr			1 1 3 0 2 0 0 9			
City	State	Zip Code	Transaction ID: 32475561			
Wall Township FEC ID number of contributing federal political committee.	NJ C	07719-9648	Amount of Each Receipt this Period 40.00			
Name of Employer Jersey Shore Radiology As- sociates	Occupation Diagnost	n ic Radiologist				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 440.00				
Full Name (Last, First, Middle Initial) Dr. Michael Brannon			Date of Receipt			
Mailing Address 7 Foxglove Ct			1 1 3 0 2 0 0 9			
City Greenville	State SC	Zip Code	Transaction ID: 32475562			
FEC ID number of contributing federal political committee.	C	29615-5505	Amount of Each Receipt this Period 42.00			
Name of Employer Greenville Radiology	Occupation Diagnost	n ic Radiologist				
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 462.00				
SUBTOTAL of Receipts This Page (optiona	<u> </u>		132.00			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 85 (check only one) X
A oi	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may ne name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Asso	ciation Politic	al Action Committee	
۸.	Full Name (Last, First, Middle Initial) Dr. Jeffrey Hu			Date of Receipt
	Mailing Address 302 Topwater Ln		7: 0 !	11 30 2009
	City Greensboro	State NC	Zip Code 27455-3423	Transaction ID: 32475563 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	60.00
	Name of Employer Greensboro Radiology	Occupation Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 660.00	
_	Full Name (Last, First, Middle Initial) Dr. Jeffrey Potter			Date of Receipt
	Mailing Address 1803 Bloomsbury Ro			11 30 2009
	City	State	Zip Code	Transaction ID: 32475565
	Greenville	NC	27858-9617	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer Eastern Radiologists	Occupation Diagnost	ⁿ ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		524.00	
_	Full Name (Last, First, Middle Initial) Dr. Edward Sullivan, III			Date of Receipt
	Mailing Address Radiology Assoc of E 2090 Columbiana Ro	Ste 4400		111 30 2009
	City Birmingham	State AL	Zip Code 35216-2153	Transaction ID: 32475567
	FEC ID number of contributing federal political committee.	C	33210-2133	Amount of Each Receipt this Period 40.00
	Name of Employer Radiology Associates of Birmingham		ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 440.00	
	SUBTOTAL of Receipts This Page (optional)	1		140.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the	Statements may not be sold or used by any personal ename and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Assoc	siation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Stuart Markowitz		Date of Receipt
Mailing Address Jefferson Radiology P 85 Seymour St Ste 20		11 30 2009
City	State Zip Code	Transaction ID: 32475571
Hartford FEC ID number of contributing federal political committee.	CT 06106-5507	Amount of Each Receipt this Period 25.00
Name of Employer Jefferson Radiology	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	
Full Name (Last, First, Middle Initial) Dr. Martin Schwartz		Date of Receipt
Mailing Address Radiology Associates 2090 Columbiana Rd	Ste 4400	11 30 7 2009
City Birmingham	State Zip Code AL 35216-2152	Transaction ID: 32475572 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Radiology Associates of Birmingham, PC	Occupation Diagnostic Radiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	700.00	
Full Name (Last, First, Middle Initial) Dr. Richard Redvanly	•	Date of Receipt
Mailing Address 4315 Gosford PI		11 30 2009
City	State Zip Code	Transaction ID: 32475573
Charlotte FEC ID number of contributing federal political committee.	NC 28277-4546	Amount of Each Receipt this Period 40.00
Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 940.00	
SUBTOTAL of Receipts This Page (optional)		165.00
TOTAL This Period (last page this line number	r only)	

SCHEDULE A (FEC Form 3	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to ssociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Jeffrey Jaindl Mailing Address 939 Quarter Roun	nd Road	Date of Receipt 1 1 3 0 2 0 0 9
City Pacolet	State Zip Code SC 29372-3516	Transaction ID: 32475574 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	100.00
Greenville Radiology, P.A. Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Diagnostic Radiologist Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) Dr. Deborah Agisim Mailing Address 5600 Laurium Rd		Date of Receipt 1 1 3 0 2 0 0 9
City	State Zip Code	Transaction ID: 32475576
Charlotte	NC 28226-5610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00]
Full Name (Last, First, Middle Initial) Dr. Dennis Johnson	'	Date of Receipt
Mailing Address Eastern Radiolog 9 Doctors Park		11
City Greenville	State Zip Code NC 27834-2801	Transaction ID: 32475577 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 27004 2001	40.00
Name of Employer Eastern Radiologists	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 524.00	
SUBTOTAL of Receipts This Page (optic	nal)	180.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 85 (check only one) X 11a
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Dr. James Rawson		, a., 7, 6, 1011 Committee	Date of Receipt
	Mailing Address Medical College of Ge 1120 15th St BA1414	orgia		11 30 2009
	City Augusta	State GA	Zip Code 30912-0006	Transaction ID: 32475578 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00012 0000	83.34
	Name of Employer Medical College of Georgia	, '	tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 916.74	
- 3.	Full Name (Last, First, Middle Initial) Dr. Carl D'Orsi	1		Date of Receipt
	Mailing Address Emory Univ Hosp 1701 Uppergate Dr 1s	11 30 2009		
	City Atlanta	State GA	Zip Code	Transaction ID: 32475580
	FEC ID number of contributing federal political committee.	C	30322-0001	Amount of Each Receipt this Period 25.00
	Name of Employer Emory University Hospital	Occupation Diagnos	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 341.25	
-).	Full Name (Last, First, Middle Initial) Dr. Jeffrey Magnuson	1		Date of Receipt
	Mailing Address 3493 Siems Ct			11 30 7 2009
	City Arden Hills	State MN	Zip Code 55112-3639	Transaction ID: 32475582
	FEC ID number of contributing federal political committee.	C	33112-3039	Amount of Each Receipt this Period 25.00
	Name of Employer St. Paul Radiology, P.A.	Occupation	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 275.00	
	SUBTOTAL of Receipts This Page (optional)			133.34
Ī	TOTAL This Period (last page this line number	only)	•	

	LE A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commerc	n copied from such Reports and State ial purposes, other than using the DCOMMITTEE (In Full) College of Radiology Associa	name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Dr. Mary Por Mailing Add City Monroe	ress 2625 Rolling Hills Dr	State NC	Zip Code 28110-8408	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of En Charlotte Ra Receipt For Prima	: _		n ic Radiologist e Year-to-Date ▼	42.00
Full Name (Dr. Mark Wit Mailing Add City Saint Loui	ress 10525 Concord School	Rd State MO	Zip Code 63128-1232	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
Name of En West Count Group, Inc. Receipt For			n Radiologist e Year-to-Date ▼ 1680.00	85.00
C. Dr. John Lim Mailing Add City Cookeville FEC ID nun federal politi	Putnam Radiology PC 315 N Washington Ave	Ste 209 State TN C	Zip Code 38501-2660	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For Prima Other		Diagnost	ic Radiologist e Year-to-Date ▼ 400.00	
SUBTOTAL o	f Receipts This Page (optional)			177.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Asso	ciation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Alfred Mansour, JR		Date of Receipt
Mailing Address Central LA Imaging I 3704 North Blvd Ste		11 30 2009
City	State Zip Code	Transaction ID: 32475587
Alexandria	LA 71301-3606	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer Central LA Imaging Inc.	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	. [
Primary General Other (specify) ▼	916.74	
Full Name (Last, First, Middle Initial) Dr. William Way, JR		Date of Receipt
Mailing Address 7713 Oakmont PI		111 30 7 2009
City	State Zip Code	Transaction ID: 32475588
Raleigh	NC 27615-5492	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Wake Radiology	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	440.00	
Full Name (Last, First, Middle Initial) Dr. Roger Vithalani		Date of Receipt
Mailing Address 516 Chesapeake Pla		11 30 7 2009
City	State Zip Code	Transaction ID: 32475589
Greenville	NC 27858-0678	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Eastern Radiology	Occupation Diagnostic Radiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	524.00	
SUBTOTAL of Receipts This Page (optional)	·····	163.34
TOTAL This Period (last page this line number	er only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57/85 (check only one) X 11a			
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) American College of Radiology Ass	sociation Politic	al Action Committee				
Full Name (Last, First, Middle Initial) Dr. Rife Huckabee			Date of Receipt			
Mailing Address 3720 Rabbit Creek	Mailing Address 3720 Rabbit Creek Ct					
City Theodore	State AL	Zip Code 36582-2505	Transaction ID: 32475590			
FEC ID number of contributing federal political committee.	C	36362-2303	Amount of Each Receipt this Period 30.00			
Name of Employer Radiology Associates of Mobile Receipt For: ☐ Primary ☐ General Other (specify) ▼		n ic Radiologist Year-to-Date ▼				
Full Name (Last, First, Middle Initial) Dr. Marcela Bohm-Velez	A i - t		Date of Receipt			
Mailing Address Weinstein Imaging 5850 Centre Ave	11 30 2009					
City State Zip Code Pittsburgh PA 15206-3780			Transaction ID: 32475593 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	10200 0700	166.67			
Name of Employer Weinstein Imaging Associa-	Occupation	n ic Radiologist				
tes Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1833.37				
Full Name (Last, First, Middle Initial) Jr., M.D. Charles Schranck			Date of Receipt			
Mailing Address 75 Fairmount Dr., N	North		11 30 2009			
City Alton	State IL	Zip Code 62002-3207	Transaction ID: 32475594			
FEC ID number of contributing federal political committee.	C	02002-0207	Amount of Each Receipt this Period 42.00			
Name of Employer Midwest Radiological Asso- ciates, P.C.	Occupation Radiolog	ist				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 462.00				
SUBTOTAL of Receipts This Page (optional	l		238.67			

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	K)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 85 (check only one)			
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) American College of Radiology Ass	sociation Politic	al Action Committee				
Full Name (Last, First, Middle Initial) Dr. Eric Sax			Date of Receipt			
Mailing Address 9 Old Sudbury Rd						
City	State	Zip Code	1 1 3 0 2 0 0 9 Transaction ID: 32475596			
Lincoln FEC ID number of contributing federal political committee.	C	01773-4807	Amount of Each Receipt this Period 83.34			
Name of Employer The Imaging Institute	Occupation Diagnost	n ic Radiologist				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 916.74				
Full Name (Last, First, Middle Initial) Dr. Douglas Picton	I		Date of Receipt			
Mailing Address 1911 NC Highway	121		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City Greenville	State NC	Zip Code 27834-7187	Transaction ID: 32475597 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	27004 7107	40.00			
Name of Employer Eastern Radiologists	Occupation Diagnost	n ic Radiologist				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 484.00				
Full Name (Last, First, Middle Initial) Dr. Marc Glickstein			Date of Receipt			
Mailing Address 962 Mott Hill Rd			11 30 2009			
City	State CT	Zip Code	Transaction ID: 32475599			
S Glastonbury FEC ID number of contributing federal political committee.	C	06073-3708	Amount of Each Receipt this Period 20.00			
Name of Employer Jefferson X-Ray	Occupation Diagnost	n ic Radiologist				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00				
SUBTOTAL of Receipts This Page (optional	I		143.34			

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 85 (check only one) X
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to association Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. William Ketcham, II Mailing Address 8824 Wildflower E City Cheyenne FEC ID number of contributing federal political committee.	State Zip Code WY 82009-1215	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Baylor College of Medicine Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 440.00	
Full Name (Last, First, Middle Initial) Dr. Karl Chiang Mailing Address Eastern Radiologi 9 Doctors Park City Greenville FEC ID number of contributing federal political committee.	State Zip Code NC 27834-2801	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Eastern Radiologists Inc Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 524.00	
Full Name (Last, First, Middle Initial) Dr. Arthur Sandy Mailing Address 2821 Argyle Rd City Birmingham FEC ID number of contributing	State Zip Code AL 35213-3403	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Advanced Imaging Assoc of AL Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 1100.00	-
SUBTOTAL of Receipts This Page (option	nal)	180.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 85 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology As	g the name and addr	ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Kerry Chandler Mailing Address 4100 Mullcroft PI			Date of Receipt
City Fuquay Varina	State NC	Zip Code 27526-8658	Transaction ID: 32475614 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer Wake Radiology Consultants Receipt For: Primary Other (specify) ▼		C Radiologist Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) Dr. Leah Schafer Mailing Address 101 Beacon Street	Apt 7		Date of Receipt 1 1 3 0 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
City	State	Zip Code	Transaction ID: 32475723
Boston	MA	02116-1508	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Newton Wellesley Radiology Associates Receipt For: Primary Other (specify) ▼		c Radiologist Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Darren M. Davenport			Date of Receipt
Mailing Address 1948 1st Ave NE			11 30 / Y Y Y Y Y
City	State	Zip Code	Transaction ID: 32475724
Cedar Rapids FEC ID number of contributing federal political committee.	C	52402-5321	Amount of Each Receipt this Period 250.00
Name of Employer Radiology Consultants of lowa Receipt For:		c Radiologist Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (options	al)		800.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 85 (check only one) X 11a
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any pers g the name and address of any political committee t esociation Political Action Committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Edward Fallon, III		Date of Receipt
Mailing Address West Reading Rad 301 S 7th Ave		11 30 2009
City	State Zip Code	Transaction ID: 32475725
West Reading FEC ID number of contributing federal political committee.	PA 19611-1410	Amount of Each Receipt this Period 250.00
Name of Employer West Reading Radiology Assoc Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Dr. Daniel McDonald Mailing Address Newton-Wellesley		Date of Receipt
2014 Washington City	State Zip Code	11 30 2009
Newton	MA 02462-1699	Transaction ID: 32475726 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Newton-Wellesley Hospital	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Christopher Ahmed		Date of Receipt
Mailing Address 105 Royal Highlar	ds Ln	1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 32518809
Dothan FEC ID number of contributing federal political committee.	AL 36305-9345	Amount of Each Receipt this Period 250.00
Name of Employer Radiology Associates of Dothan, P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	nal)	750.00

or for co	AME OF COMMITTEE (In Full) American College of Radiology Ass all Name (Last, First, Middle Initial) American College of Radiology Ass all Name (Last, First, Middle Initial) Address 211 Asphodel Dr A	Statements may e name and add	y not be sold or used by any perso	on for the purpose of soliciting contributions
Am	• • •		diess of any political committee to	solicit contributions from such committee.
		ciation Politic	al Action Committee	
	ulia Alexander			Date of Receipt
City	ng Address 211 Asphodel Dr	State	Zip Code	1 1 3 0 2 0 0 9 Transaction ID: 32518812
-	han	AL	36303-2984	Amount of Each Receipt this Period
FEC	ID number of contributing	C		250.00
Rad <u>Doth</u>	iology Associates of nan, P.C.	Occupation Diagnost	n ic Radiologist	
Rece	Primary General	Aggregate	e Year-to-Date ▼ 250.00]
				Date of Receipt
	9 1000000			11 30 7 9 9
City		State	Zip Code	Transaction ID: 32518813
<u>Dot</u>	han	AL	36301-3008	Amount of Each Receipt this Period
		С		250.00
Rad	iology Associates of	Occupation Diagnost	n ic Radiologist	
Reco	Primary General	Aggregate	e Year-to-Date ▼ 250.00]
	,			Date of Receipt
Maili	ng Address 105 Marigold Ln			11 30 7 9 9
City		State	Zip Code	Transaction ID: 32518814
<u>Dot</u>	han	AL	36305-5843	Amount of Each Receipt this Period
		С		250.00
Rad <u>Doth</u>	iology Associates of nan, P.C.	- 	ic Radiologist	
Rece		Aggregate	e Year-to-Date ▼	
	Other (specify)		250.00	
SUBTO	OTAL of Receipts This Page (optional) .	1		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 85 (check only one) X
or for commercial purposes, other than using th	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associ	ciation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. David Brink		Date of Receipt
Mailing Address 106 Nottoway Blvd City	State Zip Code	1 1 3 0 2 0 0 9 Transaction ID: 32518815
Dothan	AL 36303-2978	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Associates of Dothan Receipt For: Primary General Other (specify)	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Dr. Michael Downing		Date of Receipt
Mailing Address Radiology Associates 1900 Fairview Ave		11 30 7 2009
City	State Zip Code	Transaction ID: 32519414
Dothan FEC ID number of contributing federal political committee.	AL 36301-3099	Amount of Each Receipt this Period 250.00
Name of Employer Radiology Associates of Dothan	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Dr. Stephen Fernandez		Date of Receipt
Mailing Address 1900 Fairview Ave		1 1 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 32519415
<u>Dothan</u>	AL 36301-3008	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Associates of Dothan	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
	1	750.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 85 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to ssociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Charles Holloway		Date of Receipt
Mailing Address 109 Sandy Spring	ıs Rd	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 32519416
Dothan	AL 36303-6603	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Associates of	Occupation Diagnostic Radiologist	
Dothan Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Eric Lund		Date of Receipt
Mailing Address 211 Asphodel Dr		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 32519418
<u>Dothan</u>	AL 36303-2984	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Associates of Dothan	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Ricardo Syklawer	I	Date of Receipt
Mailing Address 101 Royal Highlar	nds Ln	M M / D D / Y Y Y Y Y Y Y X Y X Y X Y X Y X Y X Y
City	State Zip Code	Transaction ID: 32519420
<u>Dothan</u>	AL 36305-9345	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Associates of Dothan	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	nal)	750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person ne name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Brett Storm		Date of Receipt
Mailing Address 1900 Fairview Ave City	State Zip Code	1 1 3 0 20 10 20 9
Dothan	AL 36301-3008	Transaction ID: 32519838 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Associates of Dothan Receipt For:	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Sibley Turner		Date of Receipt
Mailing Address 1900 Fairview Ave		11 30 7 2009
City	State Zip Code	Transaction ID: 32519841
<u>Dothan</u>	AL 36301-3008	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Associates of Dothan, PC	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. George Veale		Date of Receipt
Mailing Address 113 Royal Highlands	Ln	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 32519842
<u>Dothan</u>	AL 36305-9345	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Associates of Dothan, P.C.	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for eac	eparate schedule(s) ch category of the ed Summary Page	FOR LINE NUMBER: PAGE 66 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Association			n for the purpose of soliciting contributions solicit contributions from such committee.
/ American College of Radiology Associ	iation Foiltical Action	Committee	
Full Name (Last, First, Middle Initial) Dr. William Campbell, JR Mailing Address 527 N Palo Alto Ave			Date of Receipt
Maining Address 527 IN Pallo Alto Ave			11 30 2009
City	State Zip C	Code	Transaction ID: 32519844
Panama City	FL 3240	01-3639	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Bay Radiology Associates	Occupation Diagnostic Radiol	logist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-D	Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) Dr. Carl Bailey, JR			Date of Receipt
Mailing Address 710 Bunkers Cove Ro			1 1 3 0 / Y Y Y Y Y
City	State Zip C	Code	Transaction ID: 32519845
Panama City	FL 3240)1-3920	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Bay Radiology Associates	Occupation Diagnostic Radio	logist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-D	Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) Dr. Lloyd Logue	1		Date of Receipt
Mailing Address 3943 Indian Springs I	Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip C		Transaction ID: 32520067
Panama City	FL 3240)4-5794	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Bay Radiology Associates, P.A.	Occupation Diagnostic Radio		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-D	Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (optional)			300.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6//85 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology As	sociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Gregory Presser			Date of Receipt
Mailing Address PO Box 1770			11 30 2009
City	State	Zip Code	Transaction ID: 32520069
Panama City FEC ID number of contributing federal political committee.	FL C	32402-1770	Amount of Each Receipt this Period 100.00
Name of Employer Bay Radiology Associates, P.A. Receipt For: Primary General Other (specify) ▼		n cic Radiologist e Year-to-Date ▼	1
Full Name (Last, First, Middle Initial) Dr. Scott Ramey Mailing Address Bay Radiology Ass	soc PA		Date of Receipt
PO Box 1770 City	State	Zip Code	11 30 2009
Panama City	FL FL	32402-1770	Transaction ID: 32520071 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Bay Radiology Associates,	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) Dr. James Strohmenger			Date of Receipt
Mailing Address 2818 Canal Dr			11 30 2009
City	State	Zip Code	Transaction ID: 32520073
Panama City FEC ID number of contributing federal political committee.	FL C	32405-1610	Amount of Each Receipt this Period 100.00
Name of Employer Bay Radiology Associates	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (options	al)		300.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 85 (check only one) X 11a
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Dr. Emily Billingsley Mailing Address 449 Sudduth Ave City Panama City FEC ID number of contributing federal political committee. Name of Employer Bay Radiology Associates Receipt For:	,	Zip Code 32401-3958 n ic Radiologist e Year-to-Date ▼	Date of Receipt M M 30 2009 Transaction ID: 32520074 Amount of Each Receipt this Period 100.00
_ 3.	Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Jason Browning	19919	1100.00	Date of Receipt
	Mailing Address 1016 Sunset Ln City Lynn Haven FEC ID number of contributing federal political committee. Name of Employer Bay Radiology Associates Receipt For: Primary General Other (specify) ▼	,	Zip Code 32444-3455 n ic Radiologist Year-to-Date ▼ 1100.00	Transaction ID: 32520173 Amount of Each Receipt this Period 100.00
<u> </u>	Full Name (Last, First, Middle Initial) Dr. Wendy Kriegel Mailing Address 528 S Bonita Ave City Panama City FEC ID number of contributing federal political committee. Name of Employer Bay Radiology Associates Receipt For: Primary General Other (specify)	,	Zip Code 32401-3979 n ic Radiologist Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	SUBTOTAL of Receipts This Page (optional)			300.00
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 85 (check only one) 11a 11b 11c 12 13 14 15 16 17 17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associ	ciation Political Action Committee	
Full Name (Last, First, Middle Initial) Vanguard Mailing Address PO Box 13750		Date of Receipt 1 1 3 0 2 0 0 9
City	State Zip Code	Transaction ID: 32682653
Philadelphia	PA 19101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	14.75
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 762.70	Interest

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TOTAL This Period (last page this line number only)	<u> </u>	14.75

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Full Name (La	ast, First, Middle Initial)							Tran	sactio	n ID:	3191	4806	;	
Mike Thom	Mike Thompson For Congress								of Disl					
Mailing Addre	ess 5429 Madison	Avenue						1 1	M /	0 0	5 /	ž	0 0 8) \
City Sacramento)	State CA	9	Zip Code 95841				Amo	unt of E	Each D	Disburs		-	_
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Mailing Addre	PSS PO Box 1575							м 1 1	M /	0	D /	ž	0 0 5	Y
City Plattsburgh		State NY)	Zip Code 12901				Amo	unt of E	Each D	Disburs	emen	t this F	Perio
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	Candidate Name Mr. William Owens						ry/							
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Full Name (La	Full Name (Last, First, Middle Initial) Cathy Mcmorris Rodgers For Congress								sactio			1206	i	
Mailing Addre	ess Box 137							м 1 1	M /	0 2	2 /	ž	0 0 5	Y
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	City Wilmington			State DE	Zip Code 19899				Amol	int of	Each	Disbur	semen	t this f	erio
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	Candidate Name Rep. Michael (Castle				Ca	011 atego Type	ory/							
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F	Full Name (Last,	First, Middle Initial)	1						Trans	sactio	n ID:	321	1405	<u> </u>	
F	Richard Burr Committee; The									of Dis		-			
N	Mailing Address Post Office Box 5928								1 1	M /	^D 0	9 /	ž	0 0 8) Y
	City Winston-Salen	n		State NC	Zip Code 27113				Amou	ınt of	Each	Disbur			
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	Candidate Name Sen. Richard N	Л. Burr				Ca	atego Type	ory/							
	Office Sought:	House X Senate President District:	Disburser	nent For: Primary Other (sp	2010 X General ecify) V										
		First, Middle Initial)							Trans	eactio	n ID:	321	11/20	<u> </u>	
-	Congressman Waxman Campaign Committee								Date M	of Dis	burse			0 ŏ s	Υ
Λ	Mailing Address	6380 Wilshire	Blvd. #161	2					11		0	4	. 2	0 0 9)
	City Los Angeles			State CA	Zip Code 90048				Amou	unt of	Each	Disbur		-	
F	Purpose of Disbu	ırsement					011		<u> </u>			-	25	00.00)
	Candidate Name Rep. Henry A. Waxman			O11 Category/ Type											
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	State: CA	District: 30	1												
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CHEDULE B (FEC FOIII 3X)		arate schedule(s)	FOR LINE NUMBER: PAGE 72 / 85 (check only one)	
TEMIZED DISBURSEMENTS	Detailed	category of the Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
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Full Name (Last, First, Middle Initial) Taking the Hill PAC				Transaction ID: 32111423 Date of Disbursement 111
Mailing Address 499 South Capitol Str Suite 404	reet, S.W.			11 04 2009
City Washington	State DC	Zip Code 20003		Amount of Each Disbursement this Perio
Purpose of Disbursement			1	2000.00
Candidate Name Taking the Hill PAC			011 Category/ Type	
Senate President	Primary Other (spe	General ▼		
State: District:				
Full Name (Last, First, Middle Initial) Kurt Schrader For Congress			Transaction ID: 32111426 Date of Disbursement	
Mailing Address 2236 Sourtheast 10th Suite 240	n Avenue			111 DO 4 Y Y Y O 9 Y
City Portland	State OR	Zip Code 97214		Amount of Each Disbursement this Period
Purpose of Disbursement			011	2000.00
Candidate Name Rep. Kurt Schrader			Category/ Type	
Office Sought: X House Senate President State: OR Disb	oursement For: X Primary Other (spe	2010 General	•	
Full Name (Last, First, Middle Initial) Hoosiers For Hill				Transaction ID: 32111433 Date of Disbursement
Mailing Address PO Box 1071				111 004 7 2009
City Seymour	State IN	Zip Code 47274		Amount of Each Disbursement this Period
Purpose of Disbursement			011	3000.00
Candidate Name Rep. Baron Hill			Category/ Type	
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	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Pag			21b 27	22 28a	—	23 28b	24 28		25 29	2 3
	y Information copied from such Reports and Stater for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	e and address of any politi	cal con	nmitt								
\mathbb{L}	American College of Radiology Association	n Political Action Com	mittee)								
	Full Name (Last, First, Middle Initial) Volunteers For Shimkus Mailing Address PO Box 5458					Date		n ID: burser			1 2 o ŏ s	Y
	City Springfield	State Zip Code IL 62705				Amou	nt of I	Each [Disbur		nt this F	-
	Purpose of Disbursement			01		L.	•			10	00.00	
	Candidate Name Rep. John M. Shimkus		C	ateg Typ								
	Senate President	ement For: 2010 Primary X General Other (specify)	al									
	State: IL District: 19 Full Name (Last, First, Middle Initial)					Trans	actio	n ID:	221	11/29		
	Hoosiers Supporting Buyer For Congress					Date		burser	nent			V
	Mailing Address 200 North Main St. P.O	. Box 712				11	M /	^D 0 :	2 /	Ý 2	0 ŏ s) 1
	City Monticello	State Zip Code IN 47960				Amou	nt of I	Each [Disbur		nt this F	-
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	Rep. Steve Buyer Office Sought: X House Senate X President State: IN District: 04 Full Name (Last, First, Middle Initial) Rogers For Congress Mailing Address PO Box 581	Primary Genera		_	•	Date of	of Dis	burser	ment	Υ 2		
	Rep. Steve Buyer Office Sought: X House Senate President State: IN District: 04 Full Name (Last, First, Middle Initial) Rogers For Congress Mailing Address PO Box 581 Post Office Box 581 City	Primary General Other (specify) ▼ State Zip Code		_	e	Date of	of Dis	burser	ment	y 2	Ó 0 Ó 9	Period
	Rep. Steve Buyer Office Sought: X House Senate President State: IN District: 04 Full Name (Last, First, Middle Initial) Rogers For Congress Mailing Address PO Box 581 Post Office Box 581 City Brighton	Primary General Other (specify) ▼ State Zip Code	al	Тур	e I	Date of	of Dis	burser	ment	y 2	2 0 0 9	Period
	Rep. Steve Buyer Office Sought: X House Senate President State: IN District: 04 Full Name (Last, First, Middle Initial) Rogers For Congress Mailing Address PO Box 581 Post Office Box 581 City Brighton Purpose of Disbursement Candidate Name Rep. Michael J. Rogers Office Sought: X House Disburs	Primary General Other (specify) ▼ State Zip Code	al C	Typ 01 ateg	e I	Date of	of Dis	burser	ment	y 2	2 0 0 9	Period

SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
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NAME OF COMMITTEE (In Full) American College of Radiology Associate	on Political Action Commit	tee	
Full Name (Last, First, Middle Initial) Scott Murphy For Congress			Transaction ID: 32111440 Date of Disbursement
Mailing Address 615 Glen Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 4 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix} \ \ \\ \begin{bmatrix} V & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix} \ \ \\ \begin{bmatrix} V & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix} \ \ \\ \begin{bmatrix} V & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix} \ \ \\ \begin{bmatrix} V & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix} \ \ \\ \begin{bmatrix} V & Y & Y & Y \\ \end{bmatrix} \ \ \\ \begin{bmatrix} V & Y & Y & Y \\ Y \\ Y & Y \\ Y & Y \\ Y & Y \\ Y & Y \\ Y \\ Y & Y \\ Y \\ Y \\ Y & Y \\ Y & Y \\ $
City Glens Falls	State Zip Code NY 12801		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	2000.00
Candidate Name Rep. Scott M. Murphy		Category/ Type	
Senate President	sement For: 2010 X Primary General Other (specify) ▼		
State: NY District: 20 Full Name (Last, First, Middle Initial)			
Schock For Congress			Transaction ID: 32111441 Date of Disbursement
Mailing Address PO Box 10555			111 04 7 2009
City Peoria	State Zip Code IL 61612		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	1500.00
Candidate Name Rep. Aaron Schock		Category/ Type	
Office Sought: X House Senate President State: IL District: 18	sement For: 2010 X Primary General Other (specify)		
Full Name (Last, First, Middle Initial) America's Leadership PAC			Transaction ID: 32124539 Date of Disbursement
Mailing Address 607 14th Street, N.W. Suite 800			111 03 7 2009
City Washington	State Zip Code DC 20005		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	2500.00
Candidate Name America's Leadership PAC		Category/ Type	
Senate President	sement For: Primary General Other (specify) ▼		
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SCHEDULE B (FEC FOIII 3X)		Use separate schedule(s)	OR LINE NUMBER: PAGE 75 / 85 check only one)
	EMIZED DISBURSEMENTS	Detailed Summary Page	21b 22 X 23 24 25 27 28a 28b 28c 29
	y Information copied from such Reports and State or commercial purposes, other than using the na		person for the purpose of soliciting contributions ttee to solicit contributions from such committee
\rangle	NAME OF COMMITTEE (In Full) American College of Radiology Associati	··	
<u>/</u>	Full Name (Last, First, Middle Initial) Charles A. Gonzalez Congressional Cam	oaign	Transaction ID: 32124540 Date of Disbursement
	Mailing Address PO Box 12612		111 04 7 2009
	City San Antonio	State Zip Code TX 78212	Amount of Each Disbursement this Period
	Purpose of Disbursement	01	2000.00
	Candidate Name Rep. Charles A. Gonzalez	Cate	gory/ pe
	Senate President	ement For: 2010 (Primary General Other (specify)	
	State: TX District: 20 Full Name (Last, First, Middle Initial)		Transportion ID: 00104544
	Friends Of Sherrod Brown		Transaction ID: 32124544 Date of Disbursement
	Mailing Address PO Box 76187 Suite 800		111 04 7 2009
	City Washington	State Zip Code DC 20013	Amount of Each Disbursement this Perio
	Purpose of Disbursement	01	1500.00
	Candidate Name Sen. Sherrod Brown	Cate Ty	gory/ pe
	9 🗎	ement For: 2012 Primary General Other (specify)	
	State: OH District: Full Name (Last, First, Middle Initial)	_	T .: ID .00404540
	Rogers For Congress		Transaction ID: 32124549 Date of Disbursement
	Mailing Address PO Box 581 Post Office Box 581		1 1 M / D D / Y Y Y O O 9 Y
	City Brighton	State Zip Code MI 48116	Amount of Each Disbursement this Perio
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	Candidate Name Rep. Michael J. Rogers	Cate Ty	
		ement For: 2010 Primary General Other (specify)	
	State. 1911 District. 00		

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SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 76 / 85
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or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
American College of Radiology Association	Political Action Committe	ee	
Full Name (Last, First, Middle Initial) Mary Bono Mack Committee			Transaction ID: 32124699 Date of Disbursement
Mailing Address PO Box 3370			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 4 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix} $
,	State Zip Code CA 92263		Amount of Each Disbursement this Period
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Candidate Name Rep. Mary Bono Mack		Category/ Type	
9 17	ment For: 2010 Primary General Other (specify)		
State: CA District: 45	· · · · · · · · · · · · · · · · · · ·		
Full Name (Last, First, Middle Initial) Bill Cassidy For Congress			Transaction ID: 32124701 Date of Disbursement
Mailing Address 8550 United Plaza Blvd. Suite 1001			11 1 D Y Y Y O O 9
,	State Zip Code LA 70809		Amount of Each Disbursement this Period
Purpose of Disbursement		011	2000.00
Candidate Name Rep. William Cassidy, MD		Category/ Type	
ů 💢	ment For: 2010 Primary General Other (specify)		
State: LA District: 06			
Full Name (Last, First, Middle Initial)			Transaction ID: 32263276
Dan 10			Date of Disbursement
Mailing Address 1088 Bishop Street Suite	1009		$ \begin{bmatrix} M & M \\ 1 & 1 \end{bmatrix} \begin{bmatrix} D & 0 & 0 \\ 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 0 \end{bmatrix} $
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Candidate Name Sen. Daniel Inouye		011 Category/ Type	
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SUBTOTAL of Disbursements This Page (optional) .		<u></u>	5500.00

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SCHEDULE B (FEC Form 3X)

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	y Information copied from such Reports and State for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) American College of Radiology Association	e and address of any political com			
	Full Name (Last, First, Middle Initial) Souder For Congress Inc. Mailing Address P.O. Box 40233			Transaction ID: 32287 Date of Disbursement	2 0 0 9 Y
	City Fort Wayne Purpose of Disbursement	State Zip Code IN 46804		Amount of Each Disburse	ment this Period
	Candidate Name Rep. Mark E. Souder Office Sought: X House Disburs		011 ategory/ Type		
	Senate President State: IN District: 03	Primary General Other (specify) ▼			
•	Full Name (Last, First, Middle Initial) Coulson For Congress Mailing Address PO Box 2354			Transaction ID: 32287 Date of Disbursement	2 0 0 9 Y
	City Glenview Purpose of Disbursement	State Zip Code IL 60025	011	Amount of Each Disburse	ment this Period 5000.00
			ategory/ Type		
	Full Name (Last, First, Middle Initial) Marcia Fudge For Congress			Transaction ID: 32288 Date of Disbursement	388 2 0 0 9
	Mailing Address 3729 Silsby Rd City University Heights	State Zip Code OH 44118		Amount of Each Disburse	
	Purpose of Disbursement Candidate Name Rep. Marcia Fudge		011 ategory/ Type		3000.00
	X	ement For: 2010 Primary General Other (specify)			
	UBTOTAL of Disbursements This Page (optional		•		9500.00

SCHEDULE B (FEC Form 3X)

		Use separate schedule(s)	DR LINE NUMBER: PAGE 78 / 85 heck only one)
П _	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 22 X 23 24 25 2 27 28a 28b 28c 29 3
	y Information copied from such Reports and State for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) American College of Radiology Association	ne and address of any political commit	
L	Full Name (Last, First, Middle Initial)		Transaction ID: 32290965
	Friends Of Dan Maffei Mailing Address PO Box 74		Date of Disbursement M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Syracuse	State Zip Code NY 13214	Amount of Each Disbursement this Period
	Purpose of Disbursement	01	2000.00
	Candidate Name Mr. Daniel Maffei	Categ Typ	
		ement For: 2010 Primary General Other (specify)	
	Full Name (Last, First, Middle Initial) Mikulski For Senate Committee		Transaction ID: 32336953 Date of Disbursement
	Mailing Address P O B 13147		111 M / D B / Y 2009 Y
	City Baltimore	State Zip Code MD 21203	Amount of Each Disbursement this Period
	Purpose of Disbursement Candidate Name Sen. Barbara A. Mikulski	01 Categ	1 gory/
		ement For: 2010 Primary X General Other (specify)	<u></u>
	Full Name (Last, First, Middle Initial) The Freedom Project		Transaction ID: 32337044 Date of Disbursement
	Mailing Address 424 C Street, N.E. Basement Unit		1 1 1 D 1 8 Y 2 0 0 9 Y
	City Washington	State Zip Code DC 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement	01	
	Candidate Name The Freedom Project	Categ Typ	
	Senate President	ement For: Primary General Other (specify)	
	State: District:		

		TEDULE B (FEC FOIIII 3X)		Use separate schedule(s)					NE NUMBER: PAGE only one)					79 / 8	35	
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<u> </u>	American Coll	ege of Radiology	Association	Political	Action Commi	ittee)									
	•	First, Middle Initial) nny Brown-Waite PO Box 865								e of I	Disbu			_	0 ŏ 9	Y
	City			State	Zip Code				Am	ount	of Ea	ch D	isburse			
	Brooksville Purpose of Disbu	ırsement		FL	34605	_								25	00.00	
	Candidate Name Rep. Virginia E						01 ateg Typ	ory/								
	Office Sought: State: FL	X House Senate President District: 05	Disburse	ment For: Primary Other (spe	2010 General ecify)											
		First, Middle Initial) rolyn Mccarthy								e of I	Disbu	rsem				V
	Mailing Address 151 Linden Road								1		/ [1 9		ž	0 ŏ 9	Y
	City Mineola			State NY	Zip Code 11501				Am	ount	of Ea	ch D	isburs			
	Purpose of Disbursement Candidate Name						01 ⁻ ateg			•			•	10	00.00	
	Rep. Carolyn Moffice Sought: State: NY	X House Senate President District: 04	Disburse	ment For: Primary Other (spe	2010 X General ecify) ▼		Тур	e								
	Full Name (Last, Linder For Cor	First, Middle Initial) ngress	•						Dat	e of I	Disbu	rsem				
	Mailing Address	P. O. Box 4026	3						1 M	1 ^M	/ [1 9		Ý Ž	0 0 9	Y
	City Duluth			State GA	Zip Code 30096				Am	ount	of Ea	ch D	isburs			-
	Purpose of Disbu Candidate Name Rep. John Lind						01 ateg Typ	ory/						10	00.00	
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 CHEDULE B (FEC FOIII 3X)		' ∣ Use sepa	Use separate schedule(s)				IE NUMBER: PAGE 80 / nly one)					
EMIZED DISBUR		Detailed	category of the Summary Page		21b	22 28a	X 23 28b			9		
y Information copied from s or commercial purposes, o NAME OF COMMITTEE American College of F	ther than using th	ne name and addre	ss of any political	l comr								
Full Name (Last, First, Mic Sue Myrick For Congr Mailing Address P.O	,						saction II	sement		ў 9 [×]		
City		State	Zip Code			Amo	unt of Eac					
Charlotte Purpose of Disbursement		NC	28237			, C			1000	.00		
Candidate Name Rep. Sue Wilkins Myr	ick			Ca	011 tegory/ ype	J						
	nate esident	isbursement For: Primary Other (spe	2010 X General ecify) V									
Full Name (Last, First, Mic Bill Cassidy For Cong						Date	saction II of Disbur	sement				
Mailing Address 8550 United Plaza Blvd. Suite 1001						1 1	M / D	1 7 ^D	ž0	0 9 °		
City Baton Rouge		State LA	Zip Code 70809			Amo	unt of Eac	h Disburs				
Purpose of Disbursement					011				1000	.00		
Candidate Name Rep. William Cassidy	, MD				tegory/ ype							
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Full Name (Last, First, Mid Walden For Congress	,					Date	saction II of Disbur	sement				
Mailing Address PO	Box 1091					111	M / D	1 7 /	ž0	ŏ9 Ť		
City Hood River		State OR	Zip Code 97031			Amo	unt of Eac	h Disburs				
Purpose of Disbursement					011				2500	.00		
Candidate Name Rep. Gregory P. Walc		ialaaaaaaa	0010		tegory/ ype							
	nate esident	isbursement For: X Primary Other (spe	2010 General									

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)				-		NUMBER: PAGE 81 / 85					85			
ITEMIZED DISBURSEMENTS	for each	category of the Summary Page		F	(check o 21b 27	n iiy C	22 28a	X	23 28b	F	24 28c	F	25 29		26 30b
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NAME OF COMMITTEE (In Full)															
American College of Radiology Association	n Political	Action Commi	ttee)											
Full Name (Last, First, Middle Initial) Walden For Congress									on ID		32338 nent	8007	,		
Mailing Address PO Box 1091							1 1	М	/ D	1 7) / N	Ž	o ŏ	9 ^Y	
,	State OR	Zip Code 97031					Amou	ınt o	f Each	ı D	isburse	men	t this	Peric	od
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Candidate Name Rep. Gregory P. Walden					egory/ ype										
9 2	ment For: Primary Other (spe	2010 General cify) ▼													
State: OR District: 02		•													
Full Name (Last, First, Middle Initial) Cathy Mcmorris Rodgers For Congress							Date	of D	isburs	em		012	2		
Mailing Address Box 137							1 1	М	/ D 1	1 7) / Y	Ž	o ŏ	9 ^Y	
•	State WA	Zip Code 99210					Amou	ınt o	f Each	ı D	isburse	-			od
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Candidate Name Rep. Cathy McMorris Rodgers				al	egory/ ype										
	ment For: Primary Other (spe	2010 General			<u> </u>										
State: WA District: 05															
Full Name (Last, First, Middle Initial) Carper For Senate							Date	of D	isburs	em					
Mailing Address 19 East Commons Blvd S	Second Flo	oor					1 1	М	/ D 1	1 8		Ž	οŏ	9 ^Y	
New Castle	State DE	Zip Code 19720					Amou	int o	f Each	ı D	isburse	-			od
Purpose of Disbursement			Г	,	111			-	_			ΙŪ	00.00)	
Candidate Name Sen. Thomas Carper				at	egory/ ype										
	ment For: Primary Other (spe	2012 General cify)													
SUBTOTAL of Disbursements This Page (optional) .				_	•		*			_	•	40	00.00)	$\overline{}$
TOTAL This Period (last page this line number only)							$\overline{}$		-	-	-	-	-		Ħ

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 82 / 85
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only one) 21b 22 X 23 24 25 2 27 28a 28b 28c 29 3
		y any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee
NAME OF COMMITTEE (In Full) American College of Radiology Assoc		
Full Name (Last, First, Middle Initial) Majority Committee PAC		Transaction ID: 32339318 Date of Disbursement
Mailing Address P.O. BOX 10134		111 D 18 / Y 2009
City BAKERSFIELD	State Zip Code CA 93389	Amount of Each Disbursement this Period
Purpose of Disbursement		011
Candidate Name Majority Committee PAC		Category/ Type
Senate President	oursement For: Primary General Other (specify) ▼	
Full Name (Last, First, Middle Initial)		Transaction ID: 32340994
Majority Committee PAC		Date of Disbursement M M
Mailing Address P.O. BOX 10134		11 18 2009
City BAKERSFIELD	State Zip Code CA 93389	Amount of Each Disbursement this Period
Purpose of Disbursement Candidate Name		011
Majority Committee PAC		Category/ Type
Office Sought: House Dis Senate President State: District:	oursement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) Friends Of Jim Clyburn		Transaction ID: 32456274 Date of Disbursement
Mailing Address PO Box 12567		M M / D 1 8 / Y 2 0 0 9 Y
City Columbia	State Zip Code SC 29211	Amount of Each Disbursement this Period
Purpose of Disbursement		011
Candidate Name Rep. James E. Clyburn		Category/ Type
Senate President	oursement For: 2010 Primary X General Other (specify)	
State: SC District: 06		
SUBTOTAL of Disbursements This Page (option	nal)	10000.00
TOTAL This Period (last page this line number	only)	•

TEMIZED DISBURSEMENTS Any Information copied from such Reports and State	Use separate schedule(s for each category of the Detailed Summary Page	(check only	22 X 23 :	24 25 2
ny Information copied from such Reports and Stat		'-'	28a 28b 1	28c 29 3
r for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full) American College of Radiology Associate	ion Political Action Comm	nittee		
Full Name (Last, First, Middle Initial) Fleming For Congress			Transaction ID: 32 Date of Disbursemen	
Mailing Address P.O. Box 1236 Box 281			111	2009
City Minden	State Zip Code LA 71058		Amount of Each Disb	
Purpose of Disbursement		011		2000.00
Candidate Name Mr. John Fleming Office Sought: X House Disbu	rsement For: 2010	Category/ Type		
Senate President	X Primary General Other (specify) ▼			
State: LA District: 04 Full Name (Last, First, Middle Initial) Republican Main Street Partnership PAC)		Transaction ID: 32 Date of Disbursemen	
Mailing Address c/o G&W 2201 Wiscor Suite 320	nsin Ave. NW		111 / 23	2009
City Washington	State Zip Code DC 20007		Amount of Each Disb	
Purpose of Disbursement Candidate Name		011 Category/		5000.00
Republican Main Street Partnership PAC		Type		
Office Sought: House Disbu Senate President State: District:	rsement For: Primary General Other (specify)			
Full Name (Last, First, Middle Initial) CMR PAC			Transaction ID: 32 Date of Disbursement	
Mailing Address P.O. Box 2485			111 / 30	Y ŽOŠ9
City Springfield	State Zip Code VA 22152		Amount of Each Disb	
Purpose of Disbursement Candidate Name		011	L	5000.00
CMR PAC		Category/ Type		
Senate President	rsement For: Primary General Other (specify)			
State: District:				
				12000.00

SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s) FOR LINE (check only	NUMBER: PAGE 84 / 85
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 2 28a 28b 28c 29 3
Any Information copied from such Reports and Sta or for commercial purposes, other than using the n			
NAME OF COMMITTEE (In Full)	arrie and address or arry politica	ii committee to so	met contributions from such committee
American College of Radiology Associa	tion Political Action Comm	ittee	
Full Name (Last, First, Middle Initial)			Transaction ID: 32456607
Taking the Hill PAC			Date of Disbursement
Mailing Address 499 South Capitol Str Suite 404	eet, S.W.		111 / 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement	20003		3000.00
		011	
Candidate Name Taking the Hill PAC		Category/ Type	
Office Sought: House Disbr	ursement For: Primary General		
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial)			Transaction ID: 32813429
Rogers For Congress			Date of Disbursement
Mailing Address PO Box 581 Post Office Box 581			111 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code		Amount of Each Disbursement this Period
Brighton Purpose of Disbursement	MI 48116		1000.00
r dipose of bisbardement		011	
Candidate Name Rep. Michael J. Rogers		Category/ Type	
3	ursement For: 2010		
Senate President	X Primary General Other (specify)		
State: MI District: 08	Carior (opeony)		
Full Name (Last, First, Middle Initial) Kay Granger Campaign Fund			Transaction ID: 32813764 Date of Disbursement
Mailing Address 715 Jones Street, Sui	te 101		$\begin{bmatrix} \begin{smallmatrix} M & 1 & M \\ 1 & 1 & M \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & 2 & B \\ & 2 & 8 \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ & 2 & 0 & 0 & 9 \end{bmatrix}$
City Fort Worth	State Zip Code TX 76102		Amount of Each Disbursement this Period
Purpose of Disbursement Told 9/14 contribution lost so new check cut but	ut both contributions deposited-F	Refun os ant 12/18	2500.00 3/09
Candidate Name Rep. Kay Granger		Category/ Type	
	ursement For: 2010	1,300	T.110/44
Senate	X Primary General		Told 9/14 contribution lost so new check cut but
President	Other (specify)		st so new check cut but both contributions deposi- ted-Refund sent 12/18/09
State: TX District: 12			6500.00
SUBTOTAL of Disbursements This Page (option	al)	<u></u>	6500.00
TOTAL This Period (last page this line number o	nlv)		102500.00

•	for each category of the Detailed Summary Page ts and Statements may not be sold or used by	FOR LINE NUMBER: (check only one) 21b 22 23 24 25 26 27 28a 28b 28c X 29 30b any person for the purpose of soliciting contributions committee to solicit contributions from such committee
NAME OF COMMITTEE (In Full) American College of Radiology	Association Political Action Committee	
Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 270	25	Transaction ID: 32682654 Date of Disbursement M M M / D 3 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Richmond Purpose of Disbursement Bank fees Candidate Name	State Zip Code VA 23261-7025	Amount of Each Disbursement this Period 464.53 Oo1 Category/ Type
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify) ▼	Bank fees

SUBTOTAL of Disbursements This Page (optional)		464.53
TOTAL This Period (last page this line number only)	<u> </u>	464.53